



Vermont Healthcare Claims Uniform Reporting & Evaluation System

**Data Dictionary for the  
Vermont Health Care  
Uniform Reporting  
and Evaluation System  
(VHCURES)**

**Consolidated Data Set**

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Green Mountain Care Board  
89 Main Street  
Montpelier, VT 05620  
802-828-3301  
[gmcboard.vermont.gov](http://gmcboard.vermont.gov)

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## Introduction

The [Green Mountain Care Board \(GMCB\)](#) has a statutory mandate to collect health insurance claims data from health insurers through the Vermont Health Care Uniform Reporting and Evaluation System (VHCURES). The purpose of [VHCURES](#) is to provide information that can be used to evaluate and improve the quality and cost-effectiveness of healthcare in the state.

Vermont's final rule, as established in [Regulation H-2008-01](#) for VHCURES, went into effect on September 30, 2008. To the extent allowed by federal and state law, VHCURES data is made available as a resource for the continuous review of healthcare utilization, expenditures, and performance in Vermont. This data dictionary documents the Oracle tables created from the data submitted through VHCURES and consolidated by Onpoint Health Data, GMCB's designated claims data collection contractor.

## Understanding the Types of Available Data

Vermont's data is collected and stored using Onpoint CDM (Claims Data Manager), a robust solution built upon nearly two decades' experience in integrating statewide claims data. Onpoint CDM incorporates both automated and manual processes, including hashing, encryption, linkage, and consolidation, designed to vet submitted data for utility and reliability in follow-on research and analysis. Onpoint CDM serves not only as a storehouse for originally submitted claims data, but holds a wealth of value-added elements built through linkage and enhancement. The data warehouse consists of three primary types of data sets: core data sets, supporting data sets, and reference data sets. Separately, each provides a discrete path into the data; combined, they offer a comprehensive roadmap to understanding how healthcare is being used:

- Core data sets represent the bulk of the claims and eligibility information submitted by data reporters. Core sets not only preserve the data as originally submitted, but are supplemented with a range of enhanced and value-added fields to aid in the use of the data. Examples of core data sets include: medical claims, pharmacy claims, medical membership, and pharmacy membership.
- Supporting data sets contain primarily redundant information submitted in the original files and extracted to single occurrences for efficiency in storage and performance. Examples of supporting data sets include member detail, pharmacy detail, and provider detail.
- Reference data sets are primarily look-up files containing all valid codes and their associated labels. Reference sets also may include elements that allow the summarizing of core data at a higher level. For example, the geography reference data set is ZIP-code based with one record for each ZIP code; it also includes the county and hospital service area (HSA) codes associated with that ZIP code. Linking the medical claims data set to the geography reference data set on the ZIP code field allows the user to summarize data by county. Reference data sets include data for nonstandard code values used by individual data reporters; these often are referred to as local or homegrown codes. Users are encouraged to carefully review the contents of a reference file to determine if additional codes should be included in their specifications.

## Understanding How This Dictionary Works

This dictionary provides a list of available data elements — some as originally submitted, others as enhanced by Onpoint through review, standardization, and value-add processes. Elements are listed by table and provide technical specifications and background information, including inter-element mapping so users can plot the most efficient path to the data they need. Each dictionary table includes several columns as detailed below:

An element-specific ID that facilitates communication and look-up. Note that when an element is released as collected, its ID will match the collection rule.	The element's Oracle name as stored in the warehouse and furnished in the extract	A brief descriptive title for this element or field	There are three data types: DATE, VARCHAR2 (alphanumeric characters), and NUMBER (numbers only).	The maximum length of the element. Note that the maximum for DATE elements is 8 unless otherwise specified. Note, too, that an (x,y) notation indicates a maximum of x total digits inclusive of y possible digits to the right of a decimal point. For example, a (5,2)-length element embraces values such as 99999, 999.99, and 0.01.	A brief explanation of the contents contained in each element. The description also may indicate an element's relationship to other elements, particularly when reference data sets are involved. In many cases, this column also includes a list of all valid codes for the field. Note that many of these data sets include two codes that are necessary for the referential integrity of the warehouse: -1 (payer supplied no value) and -2 (payer supplied an incorrect or invalid value).
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC039	ADMIT_DX	Admitting Diagnosis	VARCHAR2	10	This payer-supplied field contains the ICD-9 diagnosis code that indicates the reason for the inpatient admission.

A few additional notes about using the data described in this dictionary:

- **Table order.** Data sets are listed in alphabetical order by common name (this order ignores the [REF\\_](#) prefix included in the names of reference data sets). (For a summary view, this dictionary includes an [appendix](#) that maps the data sets' common names to their Oracle table names and element prefixes.) Note that the order of data elements in the tables below does not necessarily reflect their order in the released data sets.
- **Element pairs.** There are several situations in which an element is represented by a pair of elements. For example, ZIP codes generally are presented as a pair that includes the ZIP Code field as reported by the payer and a corollary ZIP Code ID field that links more efficiently to the [REF\\_GEOGRAPHY](#) data set.
- **Use flags.** Users are encouraged to review the distribution of records by [USEFLAG](#) for each of the claims and membership data sets before working with the warehouse.

### **An Important Note About Using Claims Data**

While every effort is made to ensure the utility of VHCURES data, it is critical to understand that there are inherent challenges to working with submitted claims data. While carve-out and use flags have been employed to enhance data reliability, extensive caution still must be used when linking between claims and membership records in both the medical and pharmacy files to avoid duplicate counts and overlaps. If you need assistance in understanding how to improve the reliability of your data set, please contact [Onpoint](#) or GMCB to inquire about training and consulting services.

## Admission Source Codes

The admission source codes reference data set ([REF\\_ADMIT\\_SOURCE](#)) includes all valid admission source values and descriptions and links to the medical claims data.

REF_ADMIT_SOURCE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWADMS802	CODE	Admission Source Code	VARCHAR2	2	<b>Description:</b> This field contains a code that is used to identify a specific admission source. <b>Origin:</b> Code values are maintained by the National Uniform Billing Committee (NUBC). <b>Linkage:</b> This field links to the Admission Source element (ADMIT_SOURCE; MC021) in the medical claims data. <b>Notes:</b> This field is required for inpatient hospital claims.
DWADMS803	DESCRIPTION	Admission Source Code Description	VARCHAR2	255	<b>Description:</b> This field contains the description of the Admission Source Code element (CODE; DWADMS802). <b>Origin:</b> Descriptive values for these codes are maintained by the NUBC.



## Admission Type Codes

The admission type codes reference data set ([REF\\_ADMIT\\_TYPE](#)) includes all valid admission type values and descriptions and links to the medical claims data.

REF_ADMIT_TYPE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWADMT802	CODE	Admission Type Code	NUMBER	5	<p><b>Description:</b> This field contains a code that is used to identify a specific admission type.</p> <p><b>Origin:</b> Code values are maintained by the National Uniform Billing Committee (NUBC).</p> <p><b>Linkage:</b> This field links to the Admission Type element (ADMIT_TYPE; MC020) in the medical claims data.</p> <p><b>Notes:</b> This field is required for inpatient hospital claims.</p>
DWADMT803	DESCRIPTION	Admission Type Code Description	VARCHAR2	255	<p><b>Description:</b> This field contains the description of the Admission Type Code element (CODE; DWADMT802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by the NUBC.</p>

### Aid Category Codes (Medicaid)

The Medicaid aid category codes reference data set ([REF\\_AID\\_CATEGORY](#)) includes all valid Medicaid aid category values and descriptions and links to the Aid Category fields in the medical and pharmacy claims and membership data.

REF_AID_CATEGORY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAIDCAT802	CODE	Aid Category Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific Medicaid aid category.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> This field links to data sets the Aid Category fields (AID_CATEGORY) in the medical and pharmacy claims and membership data.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>
DWAIDCAT803	DESCRIPTION	Aid Category Code Description	VARCHAR2	255	<p><b>Description:</b> This field contains the description of the Aid Category Code element (CODE; DWAIDCAT802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>

## APR-DRG Codes

The all-patient refined diagnosis-related group (APR-DRG) codes reference data set includes all APR-DRG values assigned to identified inpatient hospital records. This table is divided between commercial ([REF\\_APRDRG\\_COMM](#)), Medicaid ([REF\\_APRDRG\\_MEDI](#)), and Medicare ([REF\\_APRDRG\\_MCARE](#)) APR-DRG codes.

**An important note of caution:** DRG versions change annually. Longitudinal comparisons based on DRG codes may reveal unexpected results and should be reviewed carefully. In particular, the DRG versions between FY2007 and FY2008 have significant changes.

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC801	IPDISCHARGE	Inpatient Discharge Identifier	NUMBER	20	<p><b>Description:</b> This field associates all claim lines for a given inpatient stay under one coded value.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Inpatient Discharge Identifier element (IPDISCHARGE) in the medical claims data.</p>
DWAPRDRGC802-1	USERKEY1	User-Defined Key 1	VARCHAR2	15	<p><b>Description:</b> This field contains a key used by the grouping software to identify the processing schedule.</p> <p><b>Notes:</b> The software matches the user keys on the record to the user keys in schedules and compares the claim dates on the record with the schedule's effective date range when determining which schedule to use for processing. These values are used primarily for housekeeping, not analysis.</p>
DWAPRDRGC802-2	USERKEY2	User-Defined Key 2	VARCHAR2	15	<p><b>Description:</b> This field contains a key used by the grouping software to identify the processing schedule.</p> <p><b>Notes:</b> The software matches the user keys on the record to the user keys in schedules and compares the claim dates on the record with the schedule's effective date range when determining which schedule to use for processing. These values are used primarily for housekeeping, not analysis.</p>
DWAPRDRGC803-1	CONDITION_CODE1	Condition Code 1	VARCHAR2	2	<p><b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.</p>
DWAPRDRGC803-2	CONDITION_CODE2	Condition Code 2	VARCHAR2	2	<p><b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.</p>
DWAPRDRGC803-3	CONDITION_CODE3	Condition Code 3	VARCHAR2	2	<p><b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.</p>

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC803-4	CONDITION_CODE4	Condition Code 4	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC803-5	CONDITION_CODE5	Condition Code 5	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC803-6	CONDITION_CODE6	Condition Code 6	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC803-7	CONDITION_CODE7	Condition Code 7	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC803-8	CONDITION_CODE8	Condition Code 8	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC803-9	CONDITION_CODE9	Condition Code 9	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC803-10	CONDITION_CODE10	Condition Code 10	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC803-11	CONDITION_CODE11	Condition Code 11	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWAPRDRGC804	ICD_VERSION_QUAL	ICD Version Identifier	NUMBER	1	<b>Description:</b> This field identifies whether the code set used is ICD-9 or ICD-10. Valid codes are 9 (ICD-9) and 0 (ICD-10).
DWAPRDRGC805	DMV_DAYS_AFTER_ADMIT	DMV Days After Admission	NUMBER	4	This field identifies the number of days after admission on which the Days on Mechanical Ventilation (DMV) started.
DWAPRDRGC806	LENGTH_OF_STAY	Length of Stay	NUMBER	4	<p><b>Description:</b> This field contains the length of stay (in days) for an inpatient claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is calculated by subtracting the payer-reported Admission Date (ADMIT_DATE; MC018) from the payer-reported Date of Service (Through) (LAST_SVC_DATE; MC060) as reported by the payer in the medical claims data. A one-day length of stay is reported if the patient was admitted and discharged on the same day or if the patient was admitted on one day and discharged on the following day. This field is populated on the first claim line. If a claim has multiple records, the length of stay will be 0 on all but the first record for that stay.</p>

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC807	DISCHARGE_DAYS_AFTER_ADMIT	Discharge Days After Admission	NUMBER	3	<p><b>Description:</b> This field contains the number of days after admission on which the discharge occurred.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is similar to length of stay (LENGTH_OF_STAY) except when the Admission Date (ADMIT_DATE; MC018) and the Date of Service (Through) (LAST_SVC_DATE; MC060) are the same; in such cases, while LENGTH_OF_STAY will be equal to 1, DISCHARGE_DAYS_AFTER_ADMIT will be 0. This field is used to determine the inclusion of certain secondary diagnoses into the calculation of admission APR-DRGs.</p>
DWAPRDRGC808	GROUPEX_TYPE_VERSION	Grouper Type & Version	NUMBER	5	<p><b>Description:</b> This field contains a code identifying the grouper type and version.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> The first two digits of this element identify the grouper type; the last three digits identify the grouper version.</p>
DWAPRDRGC809	DRG	Diagnosis-Related Group Code	NUMBER	3	<p><b>Description:</b> This field contains the all-patient refined (APR) diagnosis-related group (DRG) assigned to the inpatient stay based on the appropriate APR-DRG weight file.</p> <p><b>Origin:</b> This value is generated by 3M's APR-DRG software.</p> <p><b>Notes:</b> This field is not reported by the carrier. This field is assigned by the claims records for the inpatient stay through the 3M™ APR-DRG grouper software. In general, an APR-DRG assigned using only claims data is a medical APR-DRG because ICD-9 procedure codes are required for the assignment of a surgical code. The data in this field should be viewed with extreme caution.</p>
DWAPRDRGC810	MDC	Major Diagnostic Category	NUMBER	2	<p><b>Description:</b> This field contains the major diagnostic category (MDC) assigned at discharge and is calculated using the APR-DRG grouper version submitted.</p>
DWAPRDRGC811	RETURN_CODE_CLINICAL	DRG Error Return Code	NUMBER	2	<p><b>Description:</b> This field contains the error return code for the DRG assignment. The following should be noted:</p> <ul style="list-style-type: none"> <li>• With APR processing, this field returns the error return code for the "Discharge" DRG assignment.</li> <li>• With CMS and TRICARE processing, this field returns the error return code for the "Final" DRG assignment.</li> <li>• For PPC processing, APR also must be licensed to receive data in this field.</li> <li>• Values 19–25 are only applicable with CMS, TRICARE, and PPC.</li> <li>• Values 22, 23, and 24 are no longer valid as of Version 28 (10/1/2010) of CMS, TRICARE, and PPC.</li> </ul>

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC812	SEVERITY_OF_ILLNES S	Severity of Illness Index	NUMBER	1	<b>Description:</b> This field contains a code identifying the severity of illness (SOI) subclass assigned at discharge. This field is the value determined by the APR-DRG process that signifies the additional severity level for the DRG value outside of the APR-DRG-assigned weight value. This field is assigned by the claims records for the inpatient stay through the 3M™ APR-DRG grouper software. In general, an APR-DRG assigned using only claims data may understate the severity due to underreporting of the ICD-9 procedure code.
DWAPRDRGC813-1	DX_SOI_LEVEL1	Diagnosis Severity Of Illness Level 1	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-2	DX_SOI_LEVEL2	Diagnosis Severity Of Illness Level 2	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-3	DX_SOI_LEVEL3	Diagnosis Severity Of Illness Level 3	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-4	DX_SOI_LEVEL4	Diagnosis Severity Of Illness Level 4	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-5	DX_SOI_LEVEL5	Diagnosis Severity Of Illness Level 5	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-6	DX_SOI_LEVEL6	Diagnosis Severity Of Illness Level 6	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-7	DX_SOI_LEVEL7	Diagnosis Severity Of Illness Level 7	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-8	DX_SOI_LEVEL8	Diagnosis Severity Of Illness Level 8	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-9	DX_SOI_LEVEL9	Diagnosis Severity Of Illness Level 9	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-10	DX_SOI_LEVEL10	Diagnosis Severity Of Illness Level 10	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-11	DX_SOI_LEVEL11	Diagnosis Severity Of Illness Level 11	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-12	DX_SOI_LEVEL12	Diagnosis Severity Of Illness Level 12	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-13	DX_SOI_LEVEL13	Diagnosis Severity Of Illness Level 13	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-14	DX_SOI_LEVEL14	Diagnosis Severity Of Illness Level 14	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC813-15	DX_SOI_LEVEL15	Diagnosis Severity Of Illness Level 15	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-16	DX_SOI_LEVEL16	Diagnosis Severity Of Illness Level 16	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-17	DX_SOI_LEVEL17	Diagnosis Severity Of Illness Level 17	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-18	DX_SOI_LEVEL18	Diagnosis Severity Of Illness Level 18	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-19	DX_SOI_LEVEL19	Diagnosis Severity Of Illness Level 19	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-20	DX_SOI_LEVEL20	Diagnosis Severity Of Illness Level 20	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-21	DX_SOI_LEVEL21	Diagnosis Severity Of Illness Level 21	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-22	DX_SOI_LEVEL22	Diagnosis Severity Of Illness Level 22	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-23	DX_SOI_LEVEL23	Diagnosis Severity Of Illness Level 23	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-24	DX_SOI_LEVEL24	Diagnosis Severity Of Illness Level 24	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-25	DX_SOI_LEVEL25	Diagnosis Severity Of Illness Level 25	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-26	DX_SOI_LEVEL26	Diagnosis Severity Of Illness Level 26	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-27	DX_SOI_LEVEL27	Diagnosis Severity Of Illness Level 27	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-28	DX_SOI_LEVEL28	Diagnosis Severity Of Illness Level 28	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-29	DX_SOI_LEVEL29	Diagnosis Severity Of Illness Level 29	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-30	DX_SOI_LEVEL30	Diagnosis Severity Of Illness Level 30	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC813-31	DX_SOI_LEVEL31	Diagnosis Severity Of Illness Level 31	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-32	DX_SOI_LEVEL32	Diagnosis Severity Of Illness Level 32	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-33	DX_SOI_LEVEL33	Diagnosis Severity Of Illness Level 33	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-34	DX_SOI_LEVEL34	Diagnosis Severity Of Illness Level 34	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-35	DX_SOI_LEVEL35	Diagnosis Severity Of Illness Level 35	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-36	DX_SOI_LEVEL36	Diagnosis Severity Of Illness Level 36	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-37	DX_SOI_LEVEL37	Diagnosis Severity Of Illness Level 37	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-38	DX_SOI_LEVEL38	Diagnosis Severity Of Illness Level 38	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-39	DX_SOI_LEVEL39	Diagnosis Severity Of Illness Level 39	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-40	DX_SOI_LEVEL40	Diagnosis Severity Of Illness Level 40	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-41	DX_SOI_LEVEL41	Diagnosis Severity Of Illness Level 41	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-42	DX_SOI_LEVEL42	Diagnosis Severity Of Illness Level 42	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-43	DX_SOI_LEVEL43	Diagnosis Severity Of Illness Level 43	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-44	DX_SOI_LEVEL44	Diagnosis Severity Of Illness Level 44	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-45	DX_SOI_LEVEL45	Diagnosis Severity Of Illness Level 45	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC813-46	DX_SOI_LEVEL46	Diagnosis Severity Of Illness Level 46	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC813-47	DX_SOI_LEVEL47	Diagnosis Severity Of Illness Level 47	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-48	DX_SOI_LEVEL48	Diagnosis Severity Of Illness Level 48	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-49	DX_SOI_LEVEL49	Diagnosis Severity Of Illness Level 49	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC813-50	DX_SOI_LEVEL50	Diagnosis Severity Of Illness Level 50	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC814	RISK_OF_MORTALITY	Risk of Mortality	NUMBER	1	<b>Description:</b> This field contains the risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWAPRDRGC815-1	DX_ROM_LEVEL1	Diagnosis Risk Of Mortality Level 1	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-2	DX_ROM_LEVEL2	Diagnosis Risk Of Mortality Level 2	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-3	DX_ROM_LEVEL3	Diagnosis Risk Of Mortality Level 3	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-4	DX_ROM_LEVEL4	Diagnosis Risk Of Mortality Level 4	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-5	DX_ROM_LEVEL5	Diagnosis Risk Of Mortality Level 5	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-6	DX_ROM_LEVEL6	Diagnosis Risk Of Mortality Level 6	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-7	DX_ROM_LEVEL7	Diagnosis Risk Of Mortality Level 7	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-8	DX_ROM_LEVEL8	Diagnosis Risk Of Mortality Level 8	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-9	DX_ROM_LEVEL9	Diagnosis Risk Of Mortality Level 9	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-10	DX_ROM_LEVEL10	Diagnosis Risk Of Mortality Level 10	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPRDRGC815-11	DX_ROM_LEVEL11	Diagnosis Risk Of Mortality Level 11	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC815-12	DX_ROM_LEVEL12	Diagnosis Risk Of Mortality Level 12	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-13	DX_ROM_LEVEL13	Diagnosis Risk Of Mortality Level 13	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-14	DX_ROM_LEVEL14	Diagnosis Risk Of Mortality Level 14	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-15	DX_ROM_LEVEL15	Diagnosis Risk Of Mortality Level 15	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-16	DX_ROM_LEVEL16	Diagnosis Risk Of Mortality Level 16	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-17	DX_ROM_LEVEL17	Diagnosis Risk Of Mortality Level 17	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-18	DX_ROM_LEVEL18	Diagnosis Risk Of Mortality Level 18	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-19	DX_ROM_LEVEL19	Diagnosis Risk Of Mortality Level 19	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-20	DX_ROM_LEVEL20	Diagnosis Risk Of Mortality Level 20	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-21	DX_ROM_LEVEL21	Diagnosis Risk Of Mortality Level 21	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-22	DX_ROM_LEVEL22	Diagnosis Risk Of Mortality Level 22	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-23	DX_ROM_LEVEL23	Diagnosis Risk Of Mortality Level 23	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-24	DX_ROM_LEVEL24	Diagnosis Risk Of Mortality Level 24	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-25	DX_ROM_LEVEL25	Diagnosis Risk Of Mortality Level 25	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-26	DX_ROM_LEVEL26	Diagnosis Risk Of Mortality Level 26	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-27	DX_ROM_LEVEL27	Diagnosis Risk Of Mortality Level 27	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC815-28	DX_ROM_LEVEL28	Diagnosis Risk Of Mortality Level 28	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-29	DX_ROM_LEVEL29	Diagnosis Risk Of Mortality Level 29	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-30	DX_ROM_LEVEL30	Diagnosis Risk Of Mortality Level 30	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-31	DX_ROM_LEVEL31	Diagnosis Risk Of Mortality Level 31	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-32	DX_ROM_LEVEL32	Diagnosis Risk Of Mortality Level 32	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-33	DX_ROM_LEVEL33	Diagnosis Risk Of Mortality Level 33	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-34	DX_ROM_LEVEL34	Diagnosis Risk Of Mortality Level 34	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-35	DX_ROM_LEVEL35	Diagnosis Risk Of Mortality Level 35	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-36	DX_ROM_LEVEL36	Diagnosis Risk Of Mortality Level 36	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-37	DX_ROM_LEVEL37	Diagnosis Risk Of Mortality Level 37	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-38	DX_ROM_LEVEL38	Diagnosis Risk Of Mortality Level 38	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-39	DX_ROM_LEVEL39	Diagnosis Risk Of Mortality Level 39	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-40	DX_ROM_LEVEL40	Diagnosis Risk Of Mortality Level 40	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-41	DX_ROM_LEVEL41	Diagnosis Risk Of Mortality Level 41	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-42	DX_ROM_LEVEL42	Diagnosis Risk Of Mortality Level 42	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-43	DX_ROM_LEVEL43	Diagnosis Risk Of Mortality Level 43	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC815-44	DX_ROM_LEVEL44	Diagnosis Risk Of Mortality Level 44	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-45	DX_ROM_LEVEL45	Diagnosis Risk Of Mortality Level 45	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-46	DX_ROM_LEVEL46	Diagnosis Risk Of Mortality Level 46	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-47	DX_ROM_LEVEL47	Diagnosis Risk Of Mortality Level 47	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-48	DX_ROM_LEVEL48	Diagnosis Risk Of Mortality Level 48	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-49	DX_ROM_LEVEL49	Diagnosis Risk Of Mortality Level 49	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC815-50	DX_ROM_LEVEL50	Diagnosis Risk Of Mortality Level 50	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the APR grouper version submitted.
DWAPDRGC816	PRINCIPAL_DX_EDITS_INPATIENT	Principal Diagnosis Edits (Inpatient)	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit principal diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-1	SECONDARY_DX_EDITS_INPATIENT1	Secondary Diagnosis Edits (Inpatient) 1	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-2	SECONDARY_DX_EDITS_INPATIENT2	Secondary Diagnosis Edits (Inpatient) 2	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-3	SECONDARY_DX_EDITS_INPATIENT3	Secondary Diagnosis Edits (Inpatient) 3	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-4	SECONDARY_DX_EDITS_INPATIENT4	Secondary Diagnosis Edits (Inpatient) 4	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-5	SECONDARY_DX_EDITS_INPATIENT5	Secondary Diagnosis Edits (Inpatient) 5	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-6	SECONDARY_DX_EDITS_INPATIENT6	Secondary Diagnosis Edits (Inpatient) 6	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-7	SECONDARY_DX_EDITS_INPATIENT7	Secondary Diagnosis Edits (Inpatient) 7	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-8	SECONDARY_DX_EDITS_INPATIENT8	Secondary Diagnosis Edits (Inpatient) 8	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC817-9	SECONDARY_DX_EDITS_INPATIENT9	Secondary Diagnosis Edits (Inpatient) 9	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-10	SECONDARY_DX_EDITS_INPATIENT10	Secondary Diagnosis Edits (Inpatient) 10	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-11	SECONDARY_DX_EDITS_INPATIENT11	Secondary Diagnosis Edits (Inpatient) 11	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-12	SECONDARY_DX_EDITS_INPATIENT12	Secondary Diagnosis Edits (Inpatient) 12	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-13	SECONDARY_DX_EDITS_INPATIENT13	Secondary Diagnosis Edits (Inpatient) 13	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-14	SECONDARY_DX_EDITS_INPATIENT14	Secondary Diagnosis Edits (Inpatient) 14	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-15	SECONDARY_DX_EDITS_INPATIENT15	Secondary Diagnosis Edits (Inpatient) 15	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-16	SECONDARY_DX_EDITS_INPATIENT16	Secondary Diagnosis Edits (Inpatient) 16	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-17	SECONDARY_DX_EDITS_INPATIENT17	Secondary Diagnosis Edits (Inpatient) 17	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-18	SECONDARY_DX_EDITS_INPATIENT18	Secondary Diagnosis Edits (Inpatient) 18	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-19	SECONDARY_DX_EDITS_INPATIENT19	Secondary Diagnosis Edits (Inpatient) 19	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-20	SECONDARY_DX_EDITS_INPATIENT20	Secondary Diagnosis Edits (Inpatient) 20	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-21	SECONDARY_DX_EDITS_INPATIENT21	Secondary Diagnosis Edits (Inpatient) 21	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-22	SECONDARY_DX_EDITS_INPATIENT22	Secondary Diagnosis Edits (Inpatient) 22	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-23	SECONDARY_DX_EDITS_INPATIENT23	Secondary Diagnosis Edits (Inpatient) 23	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-24	SECONDARY_DX_EDITS_INPATIENT24	Secondary Diagnosis Edits (Inpatient) 24	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC817-25	SECONDARY_DX_EDITS_INPATIENT25	Secondary Diagnosis Edits (Inpatient) 25	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-26	SECONDARY_DX_EDITS_INPATIENT26	Secondary Diagnosis Edits (Inpatient) 26	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-27	SECONDARY_DX_EDITS_INPATIENT27	Secondary Diagnosis Edits (Inpatient) 27	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-28	SECONDARY_DX_EDITS_INPATIENT28	Secondary Diagnosis Edits (Inpatient) 28	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-29	SECONDARY_DX_EDITS_INPATIENT29	Secondary Diagnosis Edits (Inpatient) 29	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-30	SECONDARY_DX_EDITS_INPATIENT30	Secondary Diagnosis Edits (Inpatient) 30	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-31	SECONDARY_DX_EDITS_INPATIENT31	Secondary Diagnosis Edits (Inpatient) 31	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-32	SECONDARY_DX_EDITS_INPATIENT32	Secondary Diagnosis Edits (Inpatient) 32	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-33	SECONDARY_DX_EDITS_INPATIENT33	Secondary Diagnosis Edits (Inpatient) 33	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-34	SECONDARY_DX_EDITS_INPATIENT34	Secondary Diagnosis Edits (Inpatient) 34	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-35	SECONDARY_DX_EDITS_INPATIENT35	Secondary Diagnosis Edits (Inpatient) 35	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-36	SECONDARY_DX_EDITS_INPATIENT36	Secondary Diagnosis Edits (Inpatient) 36	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-37	SECONDARY_DX_EDITS_INPATIENT37	Secondary Diagnosis Edits (Inpatient) 37	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-38	SECONDARY_DX_EDITS_INPATIENT38	Secondary Diagnosis Edits (Inpatient) 38	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-39	SECONDARY_DX_EDITS_INPATIENT39	Secondary Diagnosis Edits (Inpatient) 39	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-40	SECONDARY_DX_EDITS_INPATIENT40	Secondary Diagnosis Edits (Inpatient) 40	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC817-41	SECONDARY_DX_EDITS_INPATIENT41	Secondary Diagnosis Edits (Inpatient) 41	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-42	SECONDARY_DX_EDITS_INPATIENT42	Secondary Diagnosis Edits (Inpatient) 42	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-43	SECONDARY_DX_EDITS_INPATIENT43	Secondary Diagnosis Edits (Inpatient) 43	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-44	SECONDARY_DX_EDITS_INPATIENT44	Secondary Diagnosis Edits (Inpatient) 44	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-45	SECONDARY_DX_EDITS_INPATIENT45	Secondary Diagnosis Edits (Inpatient) 45	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-46	SECONDARY_DX_EDITS_INPATIENT46	Secondary Diagnosis Edits (Inpatient) 46	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-47	SECONDARY_DX_EDITS_INPATIENT47	Secondary Diagnosis Edits (Inpatient) 47	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-48	SECONDARY_DX_EDITS_INPATIENT48	Secondary Diagnosis Edits (Inpatient) 48	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC817-49	SECONDARY_DX_EDITS_INPATIENT49	Secondary Diagnosis Edits (Inpatient) 49	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWAPDRGC818-1	PROCEDURE_EDITS1	Procedure Edits 1	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-2	PROCEDURE_EDITS2	Procedure Edits 2	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-3	PROCEDURE_EDITS3	Procedure Edits 3	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-4	PROCEDURE_EDITS4	Procedure Edits 4	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-5	PROCEDURE_EDITS5	Procedure Edits 5	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-6	PROCEDURE_EDITS6	Procedure Edits 6	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-7	PROCEDURE_EDITS7	Procedure Edits 7	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC818-8	PROCEDURE_EDITS8	<b>Procedure Edits 8</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-9	PROCEDURE_EDITS9	<b>Procedure Edits 9</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-10	PROCEDURE_EDITS10	<b>Procedure Edits 10</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-11	PROCEDURE_EDITS11	<b>Procedure Edits 11</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-12	PROCEDURE_EDITS12	<b>Procedure Edits 12</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-13	PROCEDURE_EDITS13	<b>Procedure Edits 13</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-14	PROCEDURE_EDITS14	<b>Procedure Edits 14</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-15	PROCEDURE_EDITS15	<b>Procedure Edits 15</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-16	PROCEDURE_EDITS16	<b>Procedure Edits 16</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-17	PROCEDURE_EDITS17	<b>Procedure Edits 17</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-18	PROCEDURE_EDITS18	<b>Procedure Edits 18</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-19	PROCEDURE_EDITS19	<b>Procedure Edits 19</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-20	PROCEDURE_EDITS20	<b>Procedure Edits 20</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-21	PROCEDURE_EDITS21	<b>Procedure Edits 21</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-22	PROCEDURE_EDITS22	<b>Procedure Edits 22</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-23	PROCEDURE_EDITS23	<b>Procedure Edits 23</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC818-24	PROCEDURE_EDITS24	Procedure Edits 24	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-25	PROCEDURE_EDITS25	Procedure Edits 25	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-26	PROCEDURE_EDITS26	Procedure Edits 26	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-27	PROCEDURE_EDITS27	Procedure Edits 27	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-28	PROCEDURE_EDITS28	Procedure Edits 28	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-29	PROCEDURE_EDITS29	Procedure Edits 29	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-30	PROCEDURE_EDITS30	Procedure Edits 30	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-31	PROCEDURE_EDITS31	Procedure Edits 31	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-32	PROCEDURE_EDITS32	Procedure Edits 32	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-33	PROCEDURE_EDITS33	Procedure Edits 33	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-34	PROCEDURE_EDITS34	Procedure Edits 34	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-35	PROCEDURE_EDITS35	Procedure Edits 35	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-36	PROCEDURE_EDITS36	Procedure Edits 36	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-37	PROCEDURE_EDITS37	Procedure Edits 37	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-38	PROCEDURE_EDITS38	Procedure Edits 38	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPRDRGC818-39	PROCEDURE_EDITS39	Procedure Edits 39	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPDRGC818-40	PROCEDURE_EDITS40	<b>Procedure Edits 40</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-41	PROCEDURE_EDITS41	<b>Procedure Edits 41</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-42	PROCEDURE_EDITS42	<b>Procedure Edits 42</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-43	PROCEDURE_EDITS43	<b>Procedure Edits 43</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-44	PROCEDURE_EDITS44	<b>Procedure Edits 44</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-45	PROCEDURE_EDITS45	<b>Procedure Edits 45</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-46	PROCEDURE_EDITS46	<b>Procedure Edits 46</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-47	PROCEDURE_EDITS47	<b>Procedure Edits 47</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-48	PROCEDURE_EDITS48	<b>Procedure Edits 48</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-49	PROCEDURE_EDITS49	<b>Procedure Edits 49</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-50	PROCEDURE_EDITS50	<b>Procedure Edits 50</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC818-51	PROCEDURE_EDITS51	<b>Procedure Edits 51</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWAPDRGC819	MAPPING_INDICATOR	<b>Mapping Indicator</b>	NUMBER	1	<b>Description:</b> This field contains a code indicating whether or not mapping was called and if it occurred.
DWAPDRGC820	MAPPING_DATE	<b>Mapping Date</b>	DATE	8	<b>Description:</b> This field contains the effective ICD-9-CM date used for mapping.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC821	MAPPING_TYPE	Mapping Type	NUMBER	1	<b>Description:</b> This field contains a code indicating what type of mapping was used. Types of mapping include: <ul style="list-style-type: none"> <li>Historical — Maps a new ICD-9-CM code to an existing ICD-9-CM code that would cause the patient to be assigned to the same DRG as they would have if there had been no change in ICD-9-CM.</li> <li>Logical — Maps a new ICD-9-CM code to the DRG that is clinically most appropriate</li> </ul>
DWAPRDRGC822	WEIGHT	DRG Relative Weight	NUMBER	9	<b>Description:</b> This field indicates the relative weight for the DRG.
DWAPRDRGC823	MEDICAL_SURGICAL_FLAG	Medical Surgical Flag	NUMBER	1	<b>Description:</b> This field contains the Medical Surgical Flag assigned at discharge and is calculated using the grouper version submitted.
DWAPRDRGC824	ADMIT_DX_EDITS_INPATIENT	Admit Diagnosis Edits (Inpatient)	NUMBER	1	<b>Description:</b> This field returns a blank when there are no edits or if the admitting diagnosis code field is left blank on input.
DWAPRDRGC825-1	DX_AFFECT_DRG_FL AG1	Diagnosis-Affected DRG Flag 1	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-2	DX_AFFECT_DRG_FL AG2	Diagnosis-Affected DRG Flag 2	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-3	DX_AFFECT_DRG_FL AG3	Diagnosis-Affected DRG Flag 3	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-4	DX_AFFECT_DRG_FL AG4	Diagnosis-Affected DRG Flag 4	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-5	DX_AFFECT_DRG_FL AG5	Diagnosis-Affected DRG Flag 5	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-6	DX_AFFECT_DRG_FL AG6	Diagnosis-Affected DRG Flag 6	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-7	DX_AFFECT_DRG_FL AG7	Diagnosis-Affected DRG Flag 7	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-8	DX_AFFECT_DRG_FL AG8	Diagnosis-Affected DRG Flag 8	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-9	DX_AFFECT_DRG_FL AG9	Diagnosis-Affected DRG Flag 9	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-10	DX_AFFECT_DRG_FL AG10	Diagnosis-Affected DRG Flag 10	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC825-11	DX_AFFECT_DRG_FL AG11	Diagnosis-Affected DRG Flag 11	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-12	DX_AFFECT_DRG_FL AG12	Diagnosis-Affected DRG Flag 12	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-13	DX_AFFECT_DRG_FL AG13	Diagnosis-Affected DRG Flag 13	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-14	DX_AFFECT_DRG_FL AG14	Diagnosis-Affected DRG Flag 14	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-15	DX_AFFECT_DRG_FL AG15	Diagnosis-Affected DRG Flag 15	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-16	DX_AFFECT_DRG_FL AG16	Diagnosis-Affected DRG Flag 16	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-17	DX_AFFECT_DRG_FL AG17	Diagnosis-Affected DRG Flag 17	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-18	DX_AFFECT_DRG_FL AG18	Diagnosis-Affected DRG Flag 18	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-19	DX_AFFECT_DRG_FL AG19	Diagnosis-Affected DRG Flag 19	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-20	DX_AFFECT_DRG_FL AG20	Diagnosis-Affected DRG Flag 20	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-21	DX_AFFECT_DRG_FL AG21	Diagnosis-Affected DRG Flag 21	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-22	DX_AFFECT_DRG_FL AG22	Diagnosis-Affected DRG Flag 22	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-23	DX_AFFECT_DRG_FL AG23	Diagnosis-Affected DRG Flag 23	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-24	DX_AFFECT_DRG_FL AG24	Diagnosis-Affected DRG Flag 24	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-25	DX_AFFECT_DRG_FL AG25	Diagnosis-Affected DRG Flag 25	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-26	DX_AFFECT_DRG_FL AG26	Diagnosis-Affected DRG Flag 26	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC825-27	DX_AFFECT_DRG_FL AG27	Diagnosis-Affected DRG Flag 27	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-28	DX_AFFECT_DRG_FL AG28	Diagnosis-Affected DRG Flag 28	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-29	DX_AFFECT_DRG_FL AG29	Diagnosis-Affected DRG Flag 29	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-30	DX_AFFECT_DRG_FL AG30	Diagnosis-Affected DRG Flag 30	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-31	DX_AFFECT_DRG_FL AG31	Diagnosis-Affected DRG Flag 31	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-32	DX_AFFECT_DRG_FL AG32	Diagnosis-Affected DRG Flag 32	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-33	DX_AFFECT_DRG_FL AG33	Diagnosis-Affected DRG Flag 33	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-34	DX_AFFECT_DRG_FL AG34	Diagnosis-Affected DRG Flag 34	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-35	DX_AFFECT_DRG_FL AG35	Diagnosis-Affected DRG Flag 35	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-36	DX_AFFECT_DRG_FL AG36	Diagnosis-Affected DRG Flag 36	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-37	DX_AFFECT_DRG_FL AG37	Diagnosis-Affected DRG Flag 37	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-38	DX_AFFECT_DRG_FL AG38	Diagnosis-Affected DRG Flag 38	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-39	DX_AFFECT_DRG_FL AG39	Diagnosis-Affected DRG Flag 39	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-40	DX_AFFECT_DRG_FL AG40	Diagnosis-Affected DRG Flag 40	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-41	DX_AFFECT_DRG_FL AG41	Diagnosis-Affected DRG Flag 41	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-42	DX_AFFECT_DRG_FL AG42	Diagnosis-Affected DRG Flag 42	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC825-43	DX_AFFECT_DRG_FL AG43	Diagnosis-Affected DRG Flag 43	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-44	DX_AFFECT_DRG_FL AG44	Diagnosis-Affected DRG Flag 44	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-45	DX_AFFECT_DRG_FL AG45	Diagnosis-Affected DRG Flag 45	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-46	DX_AFFECT_DRG_FL AG46	Diagnosis-Affected DRG Flag 46	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-47	DX_AFFECT_DRG_FL AG47	Diagnosis-Affected DRG Flag 47	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-48	DX_AFFECT_DRG_FL AG48	Diagnosis-Affected DRG Flag 48	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-49	DX_AFFECT_DRG_FL AG49	Diagnosis-Affected DRG Flag 49	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC825-50	DX_AFFECT_DRG_FL AG50	Diagnosis-Affected DRG Flag 50	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-1	PROCEDURE_AFFECT _DRG_FLAG1	Procedure-Affected DRG Flag 1	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-2	PROCEDURE_AFFECT _DRG_FLAG2	Procedure-Affected DRG Flag 2	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-3	PROCEDURE_AFFECT _DRG_FLAG3	Procedure-Affected DRG Flag 3	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-4	PROCEDURE_AFFECT _DRG_FLAG4	Procedure-Affected DRG Flag 4	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-5	PROCEDURE_AFFECT _DRG_FLAG5	Procedure-Affected DRG Flag 5	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-6	PROCEDURE_AFFECT _DRG_FLAG6	Procedure-Affected DRG Flag 6	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-7	PROCEDURE_AFFECT _DRG_FLAG7	Procedure-Affected DRG Flag 7	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-8	PROCEDURE_AFFECT _DRG_FLAG8	Procedure-Affected DRG Flag 8	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.

REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC826-9	PROCEDURE_AFFECT_DRG_FLAG9	Procedure-Affected DRG Flag 9	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-10	PROCEDURE_AFFECT_DRG_FLAG10	Procedure-Affected DRG Flag 10	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-11	PROCEDURE_AFFECT_DRG_FLAG11	Procedure-Affected DRG Flag 11	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-12	PROCEDURE_AFFECT_DRG_FLAG12	Procedure-Affected DRG Flag 12	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-13	PROCEDURE_AFFECT_DRG_FLAG13	Procedure-Affected DRG Flag 13	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-14	PROCEDURE_AFFECT_DRG_FLAG14	Procedure-Affected DRG Flag 14	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-15	PROCEDURE_AFFECT_DRG_FLAG15	Procedure-Affected DRG Flag 15	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-16	PROCEDURE_AFFECT_DRG_FLAG16	Procedure-Affected DRG Flag 16	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-17	PROCEDURE_AFFECT_DRG_FLAG17	Procedure-Affected DRG Flag 17	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-18	PROCEDURE_AFFECT_DRG_FLAG18	Procedure-Affected DRG Flag 18	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-19	PROCEDURE_AFFECT_DRG_FLAG19	Procedure-Affected DRG Flag 19	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-20	PROCEDURE_AFFECT_DRG_FLAG20	Procedure-Affected DRG Flag 20	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-21	PROCEDURE_AFFECT_DRG_FLAG21	Procedure-Affected DRG Flag 21	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-22	PROCEDURE_AFFECT_DRG_FLAG22	Procedure-Affected DRG Flag 22	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-23	PROCEDURE_AFFECT_DRG_FLAG23	Procedure-Affected DRG Flag 23	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-24	PROCEDURE_AFFECT_DRG_FLAG24	Procedure-Affected DRG Flag 24	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.



REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC826-25	PROCEDURE_AFFECT_DRG_FLAG25	Procedure-Affected DRG Flag 25	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-26	PROCEDURE_AFFECT_DRG_FLAG26	Procedure-Affected DRG Flag 26	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-27	PROCEDURE_AFFECT_DRG_FLAG27	Procedure-Affected DRG Flag 27	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-28	PROCEDURE_AFFECT_DRG_FLAG28	Procedure-Affected DRG Flag 28	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-29	PROCEDURE_AFFECT_DRG_FLAG29	Procedure-Affected DRG Flag 29	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-30	PROCEDURE_AFFECT_DRG_FLAG30	Procedure-Affected DRG Flag 30	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-31	PROCEDURE_AFFECT_DRG_FLAG31	Procedure-Affected DRG Flag 31	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-32	PROCEDURE_AFFECT_DRG_FLAG32	Procedure-Affected DRG Flag 32	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-33	PROCEDURE_AFFECT_DRG_FLAG33	Procedure-Affected DRG Flag 33	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-34	PROCEDURE_AFFECT_DRG_FLAG34	Procedure-Affected DRG Flag 34	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-35	PROCEDURE_AFFECT_DRG_FLAG35	Procedure-Affected DRG Flag 35	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-36	PROCEDURE_AFFECT_DRG_FLAG36	Procedure-Affected DRG Flag 36	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-37	PROCEDURE_AFFECT_DRG_FLAG37	Procedure-Affected DRG Flag 37	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-38	PROCEDURE_AFFECT_DRG_FLAG38	Procedure-Affected DRG Flag 38	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-39	PROCEDURE_AFFECT_DRG_FLAG39	Procedure-Affected DRG Flag 39	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-40	PROCEDURE_AFFECT_DRG_FLAG40	Procedure-Affected DRG Flag 40	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.



REF_APRDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGC826-41	PROCEDURE_AFFECT_DRG_FLAG41	Procedure-Affected DRG Flag 41	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-42	PROCEDURE_AFFECT_DRG_FLAG42	Procedure-Affected DRG Flag 42	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-43	PROCEDURE_AFFECT_DRG_FLAG43	Procedure-Affected DRG Flag 43	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-44	PROCEDURE_AFFECT_DRG_FLAG44	Procedure-Affected DRG Flag 44	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-45	PROCEDURE_AFFECT_DRG_FLAG45	Procedure-Affected DRG Flag 45	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-46	PROCEDURE_AFFECT_DRG_FLAG46	Procedure-Affected DRG Flag 46	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-47	PROCEDURE_AFFECT_DRG_FLAG47	Procedure-Affected DRG Flag 47	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-48	PROCEDURE_AFFECT_DRG_FLAG48	Procedure-Affected DRG Flag 48	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-49	PROCEDURE_AFFECT_DRG_FLAG49	Procedure-Affected DRG Flag 49	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-50	PROCEDURE_AFFECT_DRG_FLAG50	Procedure-Affected DRG Flag 50	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC826-51	PROCEDURE_AFFECT_DRG_FLAG51	Procedure-Affected DRG Flag 51	NUMBER	1	<b>Description:</b> This field contains a flag that identifies how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWAPRDRGC827	APRDRG_LABEL_IDN	APR-DRG Label ID Number	NUMBER	22	<b>Description:</b> The field contains the APR-DRG Label ID Number, which links to the REF_APRDRG_LABEL data set's ID Number element (IDN).

## APR-DRG Labels

The APR-DRG labels reference data set ([REF\\_APRDRG\\_LABEL](#)) includes the all-patient refined diagnosis-related group (APR-DRG) label descriptions as defined by 3M™ grouping software and links to the APR-DRG codes reference data set.

**An important note of caution:** DRG versions change annually. Longitudinal comparisons based on DRG codes may reveal unexpected results and should be reviewed carefully. In particular, the DRG versions between FY2007 and FY2008 have significant changes.

REF_APRDRG_LABEL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWAPRDRGL801	IDN	ID Number	NUMBER	22	<b>Description:</b> This field contains a unique ID number identifying the record and links to the APR-DRG Label ID Number element (APRDRG_LABEL_IDN) in the REF_APRDRG data set.
DWAPRDRGL802	DRG	APR-DRG Code	NUMBER	3	<b>Description:</b> This field contains the all-patient refined (APR) diagnosis-related group (DRG) assigned to the inpatient stay based on the appropriate APR-DRG weight file. It is not reported by the carrier. This field is assigned by the claims records for the inpatient stay through the 3M™ APR-DRG grouper software. In general, an APR-DRG assigned using only claims data is a medical APR-DRG because ICD-9 procedure codes are required for the assignment of a surgical code. The data in this field should be viewed with extreme caution.
DWAPRDRGL803	DESCRIPTION	APR-DRG Code Description	VARCHAR2	500	<b>Description:</b> This field contains the description of the APR-DRG Code element (DRG) as supplied by the 3M™ APR-DRG Software.
DWAPRDRGL804	BEGIN_DISCH_DATE	Begin Discharge Date Range	DATE	8	<b>Description:</b> This field contains the beginning date of the time period for which the specific APR-DRG weight table is defined.
DWAPRDRGL805	END_DISCH_DATE	End Discharge Date Range	DATE	8	<b>Description:</b> This field contains the ending date of the time period for which the specific APR-DRG weight table is defined.
DWAPRDRGL806	GROUPEX_DESCRIPTION	APR-DRG Grouper Description	VARCHAR2	8	<b>Description:</b> This field contains the specific grouper description that identifies the APR-DRG weight table used to generate the APR-DRG value and associated IDN value (IDN) for the inpatient hospital stay identified in the REF_APRDRG data set.
DWAPRDRGL807	GROUPEX_VERSION	APR-DRG Grouper Version	Number	2	<b>Description:</b> This field contains the last two characters of the APR-DRG Grouper Description field (GROUPEX_DESCRIPTION).

# Bill Type Codes

The bill type codes reference data set ([REF\\_BILL\\_TYPE](#)) includes all valid bill type values and descriptions and links to the medical claims data.

REF_BILL_TYPE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWBILT802	CODE	Type of Bill (Institutional) Code	VARCHAR2	3	<p><b>Description:</b> This field contains a code that is used to identify a specific type of bill.</p> <p><b>Origin:</b> Code values are maintained by the National Uniform Billing Committee (NUBC).</p> <p><b>Linkage:</b> This field links to the Type of Bill element (BILL_TYPE; MC036) in the medical claims data.</p> <p><b>Notes:</b> This field is to be reported for institutional claims only. Code values for this field are maintained by the National Uniform Billing Committee and set forth in the official UB-04 specifications manual.</p>
DWBILT803	DESCRIPTION	Type of Bill (Institutional) Code Description	VARCHAR2	300	<p><b>Description:</b> This field contains the description of the Type of Bill (Institutional) Code element (CODE; DWBILT802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by the NUBC.</p>

## Billing Provider Detail

The detailed billing provider data set ([BILLING\\_PROVIDER\\_DETAIL](#)) provides detailed billing provider information by payer and links to the medical claims data by the Billing Provider ID Number element ([BILLING\\_PRVIDN](#)).

BILLING_PROVIDER_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWBPRV801	IDN	<b>Billing Provider ID Number</b>	NUMBER	20	<p><b>Description:</b> This field is the primary identification number for each BILLING_PROVIDER_DETAIL record.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Billing Provider ID Number element (BILLING_PRVIDN) in the medical claims data.</p>
DWBPRV802	PAYERID	<b>Payer ID Number</b>	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (MC001) reported by the payer in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>
DWBPRV803	PID	<b>Billing Provider Number</b>	VARCHAR2	30	<p><b>Description:</b> This field contains the payer-assigned Billing Provider Number.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Billing Provider Number element (MC076) reported in the medical claims data.</p>
DWBPRV804	LAST_NAME	<b>Billing Provider Last Name or Organization Name</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the full name of provider organization or last name of individual provider.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Billing Provider Organization Name or Provider Last Name element (MC078) reported in the medical claims data.</p>
DWBPRV805	NPI	<b>Billing Provider National Provider ID Number</b>	VARCHAR2	14	<p><b>Description:</b> This field contains the National Provider Identification Number used by the U.S. Centers for Medicare &amp; Medicaid Services (CMS).</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the National Billing Provider ID element (MC077) reported in the medical claims data.</p>

# Blueprint Medical Home Indicator Codes

The Blueprint Medical Home indicator codes reference data set ([REF\\_BPMH](#)) includes all valid Blueprint Medical Home Indicator values and links to the medical and pharmacy membership data.

REF_BPMH					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWBPMH802	CODE	Blueprint Medical Home Indicator Code	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to identify a specific Blueprint Medical Home (BPMH) indicator.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to the Blueprint Medical Home Indicator element (BPMH) in the medical and pharmacy membership data.</p> <p><b>Notes:</b> Since the Blueprint Medical Home Indicator field is based on data as submitted by payers, its accuracy and completeness cannot be validated.</p>
DWBPMH803	DESCRIPTION	Blueprint Medical Home Indicator Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Blueprint Medical Home Indicator Code element (CODE; DWBPMH802).</p> <p><b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.</p>

## Blueprint Service Area Codes (Medicaid)

The Blueprint service area codes reference data set ([REF\\_BLUE\\_SVC\\_AREA](#)) includes all valid Blueprint service area values and descriptions and links to the Blueprint Service Area elements in the medical and pharmacy membership data.

REF_BLUE_SVC_AREA					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWBLUESA802	CODE	Blueprint Service Area Code	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to identify a specific Blueprint Service Area.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Blueprint Service Area element (ME207) reported by Vermont Medicaid in the member eligibility file.</p> <p><b>Linkage:</b> This field links to the Blueprint Service Area field (BLUESA) in the medical and pharmacy membership data.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>
DWBLUESA803	DESCRIPTION	Blueprint Service Area Code Description	VARCHAR2	16	<p><b>Description:</b> This field contains the description of the Blueprint Service Area Code element (CODE; DWBLUESA802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Vermont Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>

## Category of Service Codes (Medicaid)

The Medicaid category of service codes reference data set ([REF\\_COS](#)) includes all valid Medicaid categories of service code values and descriptions and links to the medical claims data.

REF_COS					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCOS802	CODE	Category of Service Code	VARCHAR2	4	<p><b>Description:</b> This field contains a code that is used to identify a specific category of service.</p> <p><b>Origin:</b> The field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> This field links to the Category of Service element (COS; MC212) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWCOS803	DESCRIPTION	Category of Service Code Description	VARCHAR2	255	<p><b>Description:</b> This field contains the description of the Category of Service Code element (CODE; DWCOS802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Vermont Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

## Chronic Care Codes (Medicaid)

The Medicaid chronic care codes reference data set ([REF\\_CHRONIC\\_CARE](#)) includes all valid Medicaid chronic care code values and descriptions and links to the Chronic Care Flag elements in the medical and pharmacy membership data.

REF_CHRONIC_CARE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCCARE802	CODE	Chronic Care Indicator Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies Medicaid beneficiaries attributed to the Vermont Chronic Care Initiative (VCCI).</p> <p><b>Origin:</b> The field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> This field links to the Chronic Care Indicator element (CHRONIC_CARE_FLAG) in the medical and pharmacy membership data.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>
DWCCARE803	DESCRIPTION	Chronic Care Indicator Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Chronic Care Indicator Code element (CODE; DWCCARE802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Vermont Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>



# Claim Status Codes

The claim status codes reference data set ([REF\\_CLAIM\\_STATUS](#)) includes all valid claim status code values and descriptions and links to the medical and pharmacy claims data.

REF_CLAIM_STATUS					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCLMS802	CODE	Claim Status Code	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to identify a specific claim status.</p> <p><b>Origin:</b> Code values are maintained by the Accredited Standards Committee (ASC) in the ASC X12 transaction set.</p> <p><b>Linkage:</b> This field links to the Claim Status element in the medical claims (CLAIM_STATUS; MC038) and pharmacy claims (CLAIM_STATUS; PC025) data.</p>
DWCLMS803	DESCRIPTION	Claim Status Code Description	VARCHAR2	75	<p><b>Description:</b> This field contains the description of the Claim Status Code element (CODE; DWCLMS802).</p> <p><b>Origin:</b> Descriptive values are supplied as recorded in the collection rule and as maintained by the Accredited Standards Committee (ASC) in the ASC X12 transaction set.</p>

# Claim Type Codes

The claim type codes reference data set ([REF\\_CLAIM\\_TYPE](#)) includes all valid claim type code values and descriptions and links to the medical claims data.

REF_CLAIM_TYPE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCLMT802	CODE	Claim Type Code	NUMBER	2	<b>Description:</b> This field contains a code that is used to identify a specific claim type.  <b>Origin:</b> This is a value-added field created by Onpoint.  <b>Linkage:</b> This field links to the Claim Type element (CLAIM_TYPE) in the medical claims data.
DWCLMT803	DESCRIPTION	Claim Type Code Description	VARCHAR2	75	<b>Description:</b> This field contains the description of the Claim Type Code element (CODE; DWCLMT802).  <b>Origin:</b> This is a value-added field created by Onpoint.

## Claim Type Codes (Medicaid)

The Medicaid claim type codes reference data set ([REF\\_CLAIM\\_TYPE\\_MCD](#)) includes all valid Medicaid claim type code values and descriptions and links to the medical claims data.

REF_CLAIM_TYPE_MCD					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCLMTMCD802	CODE	Claim Type (Medicaid) Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific Medicaid claim type.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> This field links to the Claim Type (Medicaid) element (CLAIM_TYPE_MCD; MC216) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWCLMTMCD803	DESCRIPTION	Claim Type (Medicaid) Code Description	VARCHAR2	75	<p><b>Description:</b> This field contains the description of the Claim Type (Medicaid) Code element (CODE; DWCLMTMCD802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by Vermont Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

## Claim Type Codes (Medicare)

The Medicare claim type codes reference data set ([REF\\_CLAIM\\_TYPE\\_MCR](#)) includes all valid Medicare claim type code values and descriptions and links to the medical claims data.

REF_CLAIM_TYPE_MCR					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCLMTMCR802	CODE	<b>Claim Type (Medicare) Code</b>	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific Medicare claim type.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the Claim Type (Medicare) element (CMS_CLAIM_TYPE; MC440) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWCLMTMCR803	DESCRIPTION	<b>Claim Type (Medicare) Code Description</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Claim Type (Medicare) Code element (CODE; DWCLMTMCR802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

## Compound Drug Codes

The compound drug codes reference data set ([REF\\_COMPOUND\\_DRUG](#)) includes all valid compound drug code values and descriptions and links to the pharmacy claims data.

REF_COMPOUND_DRUG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCOMD802	CODE	Compound Drug Indicator Code	VARCHAR2	2	<b>Description:</b> This field contains a code that is used to identify a specific compound drug indicator. <b>Origin:</b> Code values are contained in the VHCURES collection rule. <b>Linkage:</b> This field links to the Compound Drug Indicator element (COMPOUND_DRUG; PC031) in the pharmacy claims data.
DWCOMD803	DESCRIPTION	Compound Drug Indicator Code Description	VARCHAR2	30	<b>Description:</b> This field contains the description of the Compound Drug Indicator Code element (CODE; DWCOMD802). <b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.

# Coverage Level Codes

The coverage level codes reference data set ([REF\\_COVERAGE\\_LEVEL](#)) includes all valid coverage level code values and links to the medical and pharmacy membership data.

REF_COVERAGE_LEVEL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCOVL802	CODE	Coverage Level Code	VARCHAR2	3	<b>Description:</b> This field contains a code that is used to identify a specific coverage level.  <b>Origin:</b> Code values are contained in the VHCURES collection rule.  <b>Linkage:</b> This field links to the Coverage Level element (COVERAGE_LEVEL) in the medical and pharmacy membership data.
DWCOVL803	DESCRIPTION	Coverage Level Code Description	VARCHAR2	25	<b>Description:</b> This field contains the description of the Coverage Level Code element (CODE; DWCVL802).  <b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.

## Coverage Type Codes

The coverage type codes reference data set ([REF\\_COVERAGE\\_TYPE](#)) includes all valid coverage type code values and links to the medical and pharmacy membership data.

REF_COVERAGE_TYPE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCOVT802	CODE	Coverage Type Code	VARCHAR2	3	<b>Description:</b> This field contains a code that is used to identify a specific coverage type.  <b>Origin:</b> Code values are contained in the VHCURES collection rule.  <b>Linkage:</b> This field links to the Coverage Type element (COVERAGE_TYPE) in the medical and pharmacy membership data.
DWCOVT803	DESCRIPTION	Coverage Type Code Description	VARCHAR2	500	<b>Description:</b> This field contains the description of the Coverage Type Code element (CODE; DWCOVT802).  <b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.

## CPT Codes

The CPT codes reference data set ([REF\\_CPT](#)) includes valid codes and descriptions for local, payer-defined CPT codes and links to the medical claims data. Note that national CPT and HCPCS codes, which are maintained by the [American Medical Association \(AMA\)](#), are available for free online lookup or for purchase from the AMA's bookstore.

REF_CPT					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCPT801	ID	CPT Code ID	VARCHAR2	20	<p><b>Description:</b> This field contains an ID number that uniquely identifies a CPT code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Procedure Code ID element (CPTID) in the medical claims data.</p>
DWCPT802	CODE	CPT Code	VARCHAR2	20	<p><b>Description:</b> This field contains a code that is used to identify a specific, locally defined CPT Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to the CPT Procedure Code element (CPT; MC055) in the medical claims data set.</p> <p><b>Notes:</b> The CPT Code ID (ID; DWCPT801) is a more appropriate link to the medical claims data set.</p>
DWCPT803	DESCRIPTION	CPT Code Description	VARCHAR2	500	<p><b>Description:</b> This field contains the description of the locally defined CPT Code element (CODE; DWCPT802) as provided by the payer.</p> <p><b>Origin:</b> Descriptive values are supplied as reported by the payer.</p>
DWCPT804	PAYERID	Payer ID Number	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (MC001) reported by the payer in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>



## CPT Modifier Codes

The CPT modifier codes reference data set ([REF\\_CPT\\_MODIFIER](#)) includes valid codes and descriptions for local, payer-defined CPT modifier codes and links to the medical claims data.

REF_CPT_MODIFIER					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWCPTM801	ID	CPT Procedure Modifier ID	VARCHAR2	20	<p><b>Description:</b> This field contains an ID number that uniquely identifies a CPT procedure modifier code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the CPT Procedure Modifier 1 ID element (CPT_MOD1ID) and the CPT Procedure Modifier 2 ID element (CPT_MOD2ID) in the medical claims data.</p>
DWCPTM802	CODE	CPT Procedure Modifier Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific, locally defined CPT modifier.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to the CPT Procedure Modifier 1 (CPT_MOD1; MC056) and CPT Procedure Modifier 2 (CPT_MOD2; MC057) elements in the medical claims data.</p>
DWCPTM803	DESCRIPTION	CPT Procedure Modifier Code Description	VARCHAR2	550	<p><b>Description:</b> This field contains the description of the locally defined CPT Procedure Modifier Code element (CODE; DWCPTM802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by the payer.</p>
DWCPTM804	PAYERID	Payer ID Number	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (MC001) reported by the payer in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>

## Data Source Type Codes (Medicare)

The Medicare data source type codes reference data set ([REF\\_DATA\\_SOURCE\\_TYPE](#)) includes all valid Medicare data source type code values and descriptions and links to the medical claims data.

REF_DATA_SOURCE_TYPE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDST801	ID	Data Source Type ID	NUMBER	10	<p><b>Description:</b> This field contains an ID number that uniquely identifies a data source type code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWDST802	CODE	Data Source Type Code	VARCHAR2	3	<p><b>Description:</b> This field contains a code that indicates which of the seven MAPCP data types provided by CMS serves as the source for this record.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Data Source Type Code element (DATA_SOURCE_TYPE; MC455) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWDST803	DESCRIPTION	Data Source Type Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Data Source Type Code element (CODE; DWDST802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

## Date

The date reference data set ([REF\\_DATE](#)) includes all valid date ID codes and covers dates with values of 10/10/0220 through 12/31/2020. It links to data sets that contain a [DATEID](#) field.

REF_DATE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDAT801	ID	<b>Date Record ID Number</b>	NUMBER	10	<b>Description:</b> This field contains an ID number that uniquely identifies a date code.  <b>Origin:</b> This is a value-added field created by Onpoint.  <b>Linkage:</b> This field links to data sets' Date ID (DATEID) fields.
DWDAT802	DAY	<b>Date</b>	DATE	8	<b>Description:</b> This field identifies the date for a specific day.  <b>Origin:</b> This is a value-added field created by Onpoint.
DWDAT803	MONTH	<b>Month of Year</b>	NUMBER	2	<b>Description:</b> This field identifies the month as a number (MM) within a calendar year.  <b>Origin:</b> This is a value-added field created by Onpoint.
DWDAT804	YEAR	<b>Year</b>	NUMBER	4	<b>Description:</b> This field identifies the year in CCYY format.  <b>Origin:</b> This is a value-added field created by Onpoint.
DWDAT805	QUARTER	<b>Quarter of Year</b>	NUMBER	1	<b>Description:</b> This field contains a code that identifies the quarter of the year.  <b>Origin:</b> This is a value-added field created by Onpoint.  <b>Notes:</b> Valid codes include: <ul style="list-style-type: none"> <li>1 ..... January through March</li> <li>2 ..... April through June</li> <li>3 ..... July through September</li> <li>4 ..... October through December</li> </ul>
DWDAT806	DAY_OF_WEEK	<b>Day of Week</b>	VARCHAR2	9	<b>Description:</b> This field identifies the name of the day of the week.  <b>Origin:</b> This is a value-added field created by Onpoint.
DWDAT807	YEARMO	<b>Year &amp; Month</b>	NUMBER	6	<b>Description:</b> This field identifies the year and month in CCYYMM format.  <b>Origin:</b> This is a value-added field created by Onpoint.

REF_DATE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDAT808	DAY_TYPE	Type of Day	VARCHAR2	7	<p><b>Description:</b> This field identifies the type of day.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> Valid codes include <i>Weekend</i> and <i>Weekday</i>.</p>
DWDAT809	FED_FISCAL_YEAR	Federal Fiscal Year	NUMBER	4	<p><b>Description:</b> This field identifies the year in CCYY format.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>
DWDAT810	FED_FISCAL_QTR	Quarter of Federal Fiscal Year	NUMBER	1	<p><b>Description:</b> This field contains a code that identifies the quarter of the federal fiscal year.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> Valid codes include:</p> <p>1 ..... October through December</p> <p>2 ..... January through March</p> <p>3 ..... April through June</p> <p>4 ..... July through September</p>

## Diagnosis Codes

The diagnosis codes reference data set ([REF\\_DX](#)) includes only local, payer-defined diagnosis code values and descriptions and links to the medical claims data.

REF_DX					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDX801	ID	<b>Diagnosis Record ID Number</b>	VARCHAR2	10	<p><b>Description:</b> This field contains an ID number that uniquely identifies a locally defined Diagnosis Code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Diagnosis ID fields in the medical claims data.</p>
DWDX802	CODE	<b>Diagnosis Code</b>	VARCHAR2	10	<p><b>Description:</b> This field contains a code that is used to identify a specific, locally defined Diagnosis Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field is used to link to the diagnosis fields in the medical claims data.</p> <p><b>Notes:</b> This field may not be unique if it contains the value of a local diagnosis code assigned by a payer. The Diagnosis Record ID elements are a more appropriate link to the medical claims data set.</p>
DWDX803	DESCRIPTION	<b>Diagnosis Code Description</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the locally defined Diagnosis Code element (CODE; DWDX802) associated with the claim as provided by the payer.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>
DWDX804	PAYERID	<b>Payer ID Number</b>	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (MC001) reported by the payer in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>

# Dispense as Written Codes

The dispense as written codes reference data set ([REF\\_DAW](#)) includes all valid dispense as written (DAW) code values and descriptions and links to the pharmacy claims data.

REF_DAW					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDAW802	CODE	Dispense as Written Code	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to identify a specific dispense as written (DAW) record.</p> <p><b>Origin:</b> Code values are contained in the VHCURES collection rule.</p> <p><b>Linkage:</b> This field links to the Dispense as Written Code element (DAW; PC030) in the pharmacy claims data.</p>
DWDAW803	DESCRIPTION	Dispense as Written Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Dispense as Written Code element (CODE; DWDAW802).</p> <p><b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.</p>

# Discharge Status Codes

The discharge status codes reference data set ([REF\\_DISCHARGE\\_STATUS](#)) includes all valid inpatient discharge status values and descriptions and links to the medical claims data.

REF_DISCHARGE_STATUS					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDISS802	CODE	Discharge Status Code	NUMBER	2	<b>Description:</b> This field contains a code that is used to identify a specific inpatient discharge status.  <b>Origin:</b> Code values are maintained by the National Uniform Billing Committee (NUBC).  <b>Linkage:</b> This field links to the Discharge Status element (DISCH_STATUS; MC023) in the medical claims data.
DWDISS803	DESCRIPTION	Discharge Status Code Description	VARCHAR2	255	<b>Description:</b> This field contains the description of the Discharge Status Code element (CODE; DWDISS802).  <b>Origin:</b> Descriptive values for these codes are maintained by the NUBC.

## DRG Outlier Stay Codes (Medicare)

The Medicare DRG outlier stay codes reference data set ([REF\\_DRG\\_OUTLIER\\_STAY](#)) includes all valid Medicare DRG outlier stay code values and descriptions and links to the medical claims data.

REF_DRG_OUTLIER_STAY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDRGOS801	ID	DRG Outlier Stay Code ID	NUMBER	10	<p><b>Description:</b> This field contains an ID number that uniquely identifies a DRG outlier stay code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWDRGOS802	CODE	DRG Outlier Stay Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific DRG outlier stay.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to the DRG Outlier Stay Code field (CLAIM_DRG_OUTLIER_STAY_CODE; MC443) in the medical claims data.</p> <p><b>Notes:</b> For an institutional claim, this field contains a code that indicates the beneficiary stay under the prospective payment system which, although classified into a specific diagnosis related group, has an unusually long length (day outlier) or exceptionally high cost (cost outlier).</p>
DWDRGOS803	DESCRIPTION	DRG Outlier Stay Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains a description of the DRG Outlier Stay Code (CODE; DWDRGOS802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>



## Dual Coverage Codes (Medicaid)

The Medicaid dual coverage codes reference data set ([REF\\_DUAL\\_COVERAGE](#)) includes all valid Medicaid dual coverage values and descriptions and links to the Dual Coverage Flag elements in the medical and pharmacy membership data.

REF_DUAL_COVERAGE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWDCOV802	CODE	Dual-Coverage Flag Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific dual-coverage flag.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid and by CMS for Medicare data.</p> <p><b>Linkage:</b> This field links to the Dual-Coverage Flag elements (DUAL_COV_FLAG) in the medical and pharmacy membership data.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA). Note that Medicaid uses two codes only: a code of 0 to indicate no dual eligibility at the end of the month and a code of 1 to indicate dual eligibility at the end of the month. All other codes reported in this column pertain to Medicare. Note, too, that Medicare also uses a code of 1, but for Medicare records it indicates Medicare Part A. Attention should be paid to the type of claim when using this column.</p>
DWDCOV803	DESCRIPTION	Dual-Coverage Flag Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Dual-Coverage Flag Code element (CODE; DWDCOV802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Vermont Medicaid and by CMS for Medicare data.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

## Entitlement Codes (Medicare)

The Medicare entitlement codes reference data set ([REF\\_ENTITLEMENT\\_CODE](#)) includes all valid Medicare entitlement code values and descriptions and links to the medical membership data.

REF_ENTITLEMENT_CODE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWENTC801	ID	Monthly Entitlement Code ID	NUMBER	10	<p><b>Description:</b> This field contains an ID number that uniquely identifies an entitlement code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>
DWENTC802	CODE	Monthly Entitlement Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific entitlement code. This code indicates whether, for a specific month, the member qualified for Medicare for a specific reported enrollment month as Aged, Disabled, ESRD (End Stage Renal Disease), or Disabled and ESRD.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to both the Monthly Entitlement Code (ENTITLEMENT_CODE) and the Monthly Entitlement Code (Original) (ORIG_ENTITLEMENT_CODE) elements in the medical membership data.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>
DWENTC803	DESCRIPTION	Monthly Entitlement Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Monthly Entitlement Code element (CODE; DWENTCODE802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>

## Final Bill Codes (Medicare)

The Medicare final bill codes reference data set ([REF\\_FINAL\\_BILL](#)) includes all valid Medicare final bill code values and descriptions and links to the medical claims data.

REF_FINAL_BILL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWFBC801	ID	Final Bill Code ID	NUMBER	10	<p><b>Description:</b> This field contains an ID number that uniquely identifies a final bill code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWFBC802	CODE	Final Bill Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific final bill code. This field identifies the type of claim record being processed with respect to payment (e.g., debit/credit indicator; interim/final indicator; etc.).</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the Final Bill Code field (CLAIM_FINAL_BILL_CODE; MC449) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWFBC803	DESCRIPTION	Final Bill Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains a description of the Final Bill Code (CODE; DWFBC802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

### Full Coverage Codes (Medicaid)

The Medicaid full coverage codes reference data set ([REF\\_FULL\\_COVERAGE](#)) includes all valid Medicaid full coverage values and descriptions and links to the Full Coverage Flag elements in the medical and pharmacy membership data.

REF_FULL_COVERAGE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWFCOV802	CODE	Full-Coverage Flag Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific full-coverage flag code.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> This field links to the Full-Coverage Flag elements (FULL_COV_FLAG) in the medical and pharmacy membership data.</p>
DWFCOV803	DESCRIPTION	Full-Coverage Flag Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Full-Coverage Flag Code element (CODE; DWFCOV802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Vermont Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

# Funding Source Codes (Medicaid)

The Medicaid funding source codes reference data set ([REF\\_FUNDING\\_SOURCE](#)) includes all valid Medicaid funding source values and descriptions and links to the Funding Source element in the medical claims data.

REF_FUNDING_SOURCE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWFUNDSRC802	CODE	Funding Source Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific funding source.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> This field links to the Funding Source element (FUNDING_SOURCE; MC215) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWFUNDSRC803	DESCRIPTION	Funding Source Code Description	VARCHAR2	255	<p><b>Description:</b> This field contains the description of the Funding Source Code element (CODE; DWFUNDSCR802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Vermont Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

# Gender Codes

The gender codes reference data set ([REF\\_GENDER](#)) includes gender demographic information and links to data sets that contain a [GENDER](#) field.

REF_GENDER					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWGEN802	CODE	Member Gender Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific gender.</p> <p><b>Origin:</b> This field is supplied as reported by payers using codes contained in the VHCURES collection rule. Values are supplied as reported in the medical claims (MC012) and member eligibility (ME013) data; values are standardized by Onpoint for harmonized reporting after being supplied by payers in the pharmacy claims data (PC012).</p> <p><b>Linkage:</b> This field links to data sets that contain a gender field (GENDER).</p>
DWGEN803	DESCRIPTION	Member Gender Code Description	VARCHAR2	10	<p><b>Description:</b> This field contains the description of the Member Gender Code element (CODE; DWGEN802).</p> <p><b>Origin:</b> Descriptive values are supplied as recorded in the collection rule except for values reported in the pharmacy claims data, which have been standardized to sync across file types.</p>

# Generic Drug Codes

The generic drug codes reference data set ([REF\\_GENERIC\\_DRUG](#)) includes all valid generic drug code values and descriptions and links to the pharmacy claims data.

REF_GENERIC_DRUG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWGEND802	CODE	Generic Drug Indicator Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific generic drug indicator.</p> <p><b>Origin:</b> Code values are contained in the VHCURES collection rule.</p> <p><b>Linkage:</b> This field links to the Generic Drug Indicator element (GENERIC; PC029) in the pharmacy claims data.</p>
DWGEND803	DESCRIPTION	Generic Drug Indicator Code Description	VARCHAR2	25	<p><b>Description:</b> This field contains the description of the Generic Drug Indicator Code element (CODE; DWGEND802).</p> <p><b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.</p>

## Geography

The geography reference data set ([REF\\_GEOGRAPHY](#)) holds all valid ZIP code values and descriptions and links to data sets that contain [ZIPCODE](#) and [ZIPCODEID](#) fields.

REF_GEOGRAPHY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWGEO801	ID	<b>Geographic Record ID</b>	NUMBER	20	<p><b>Description:</b> This field contains an ID number that uniquely identifies a geographic record.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to data sets that contain a ZIP Code ID field (ZIPCODEID).</p>
DWGEO802	CODE	<b>ZIP Code</b>	VARCHAR2	5	<p><b>Description:</b> This field contains a code that is used to identify a specific ZIP code.</p> <p><b>Origin:</b> These codes are maintained by the U.S. Postal Service.</p> <p><b>Linkage:</b> This field is used to link to the first five positions of data sets' ZIP Code (ZIPCODE) fields.</p>
DWGEO803	CITY	<b>City</b>	VARCHAR2	100	<p><b>Description:</b> This field identifies the city for the reported ZIP code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>
DWGEO804	STATE	<b>State</b>	VARCHAR2	2	<p><b>Description:</b> This field identifies the state for the reported ZIP code.</p> <p><b>Origin:</b> This field is based on the ZIP code reported in DWGEO802.</p> <p><b>Notes:</b> This field uses the two-character state abbreviation defined by the U.S. Postal Service.</p>
DWGEO805	VT_COUNTY	<b>Vermont County Code</b>	NUMBER	2	<p><b>Description:</b> This field contains the code that identifies the Vermont county for the reported ZIP code.</p> <p><b>Origin:</b> This field is based on the ZIP code reported in DWGEO802.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>
DWGEO806	VT_COUNTY_NAME	<b>Vermont County Name</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the name of the Vermont county associated with the value reported in the Vermont County Code element (VT_COUNTY; DWGEO805).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>



REF_GEOGRAPHY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWGEO807	VT_HSA	<b>Vermont HSA4 Code</b>	NUMBER	2	<p><b>Description:</b> This field contains the code that identifies the Vermont hospital service area (HSA), Version 4, for the reported ZIP code. HSA4 is based on 2005–2009 hospital discharge data. Note that if an out-of-state ZIP code was reported, this field will display a value of NULL.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>
DWGEO808	VT_HSA_NAME	<b>Vermont HSA4 Name</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the name of the Vermont HSA (Version 4) associated with the value reported in the Vermont HSA4 Code element (VT_HSA; DWGEO807). Note that if an out-of-state ZIP code was reported, this field will display a value of NULL.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>
DWGEO809	VT_HSA5	<b>Vermont HSA5.1 Code</b>	NUMBER	2	<p><b>Description:</b> This field contains the code that identifies the Vermont hospital service area, Version 5.1, for the reported ZIP code. HSA5.1 is based on 2005–2009 hospital discharge data and the inpatient diagnosis code subset. Note that if an out-of-state ZIP code was reported, this field will display a value of NULL.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>
DWGEO810	VT_HSA5_NAME	<b>Vermont HSA5.1 Name</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the name of the Vermont HSA associated with the value reported in the Vermont HSA5.1 Code element (VT_HSA5; DWGEO809). Note that if an out-of-state ZIP code was reported, this field will display a value of NULL.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>
DWGEO811	VT_BPHSA	<b>Vermont Blueprint HSA Code</b>	NUMBER	2	<p><b>Description:</b> This field contains the code that identifies the Vermont Blueprint hospital service area (HSA) for the reported ZIP code.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Blueprint.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>
DWGEO812	VT_BPHSA_NAME	<b>Vermont Blueprint HSA Name</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the name of the Vermont Blueprint HSA associated with the value reported in the Vermont Blueprint HSA Code element (VT_BPHSA; DWGEO811).</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Blueprint.</p> <p><b>Notes:</b> If an out-of-state ZIP code was reported, this field will display a value of NULL.</p>

## Inpatient Discharge Codes

The inpatient discharge reference data set includes information related to all inpatient discharge records and links to the member detail and medical claims data sets. This table is divided between commercial ([REF\\_IPDISCHARGE\\_COMM](#)), Medicaid ([REF\\_IPDISCHARGE\\_MEDI](#)), and Medicare ([REF\\_IPDISCHARGE\\_MCARE](#)) inpatient discharge codes. This table includes only acute hospital inpatient stays.

REF_IPDISCHARGE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWIPDIS801	MEMBERID	<b>Member ID Number</b>	NUMBER	15	<p><b>Description:</b> This field generally represents a unique individual.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Member Detail table using the Unique Member ID Number field (UNIQ_ID; DWMEM802).</p> <p><b>Notes:</b> This field should not be used to aggregate all records associated with a member.</p>
DWIPDIS802	IPDISCHARGE	<b>Inpatient Discharge Identifier</b>	NUMBER	20	<p><b>Description:</b> This value-added field associates all claim lines for a given inpatient stay under one coded value.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Inpatient Discharge Identifier element (IPDISCHARGE; MC855) in the medical claims data set.</p>
DWIPDIS803	PATIENT_NAME	<b>Patient Name</b>	VARCHAR2	80	<b>Description:</b> This field contains the patient's name when available
DWIPDIS803A	UK1	<b>User Key 1</b>	VARCHAR2	6	<b>Description:</b> This field contains the user key for the DRG Grouper software.
DWIPDIS803B	UK2	<b>User Key 2</b>	VARCHAR2	6	<b>Description:</b> This field contains the user key for the DRG Grouper software.
DWIPDIS804	ADMIT_DATE	<b>Admission Date</b>	DATE	8	<b>Description:</b> This field contains the date of the inpatient admission as submitted by the data reporter. This field is inconsistently reported across payers. It may be underreported on inpatient claims. This field links to the date reference file using the Day of Month element (DAY; DWDAT802).
DWIPDIS805	DISCH_DATE	<b>Discharge Date</b>	DATE	8	<b>Description:</b> This payer-supplied field contains the date of discharge from the hospital as submitted by the data reporter.
DWIPDIS806	BIRTH_DATE	<b>Date of Birth</b>	DATE	8	<b>Description:</b> This field contains the date of birth when it is used to run through the DRG grouper.
DWIPDIS807	AGE_IN_YEARS	<b>Age in Years</b>	NUMBER	4	<b>Description:</b> This field contains the member's age in years as of the day of the discharge event. Ages greater than 90 years have been capped at 90.
DWIPDIS808	AGE_IN_DAYS	<b>Placeholder</b>	N/A	N/A	<i>Placeholder</i>

## REF\_IPDISCHARGE

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWIPDIS809	SEX	Member Gender	VARCHAR2	1	<p><b>Description:</b> This field contains a code that indicates the member's gender.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Gender Codes reference data set using the Member Gender Code element (CODE; DWGEN802).</p>
DWIPDIS810	DISCH_STATUS	Discharge Status	NUMBER	2	<p><b>Description:</b> This is the patient discharge code identification number. This field is inconsistently reported across data reporters. It may be underreported on inpatient records or unnecessarily reported on outpatient records. This field links to the REF_DISCHARGE_STATUS file using DWDISS802.</p>
DWIPDIS811	CONDITION_CODE	Condition Code	VARCHAR2	1	<p><b>Description:</b> This field contains the condition code of the patient when it is available.</p>
DWIPDIS812	BIRTH_WEIGHT	Birth Weight	NUMBER	4	<p><b>Description:</b> This field contains the payer-reported infant birth weight . This field presently is not collected.</p>
DWIPDIS813	DMV	Days on Mechanical Ventilation	NUMBER	11	<p><b>Description:</b> This field contains the payer-reported number of days on mechanical ventilation. This field presently is not collected.</p>
DWIPDIS813A	INPATIENT_CATEGORY	Inpatient Category	VARCHAR2	2	<p><b>Description:</b> This field is currently a placeholder for future enhancements.</p>
DWIPDIS814	ADMIT_DX	Admitting Diagnosis	VARCHAR2	10	<p>This field contains the ICD diagnosis code indicating the reason for the inpatient admission.</p>
DWIPDIS815	PDX	Primary Diagnosis	VARCHAR2	10	<p>This field contains the primary diagnosis code, which has been selected from the claim that reported the most payment dollars for this stay.</p>
DWIPDIS816	DX1	Principal Diagnosis	VARCHAR2	10	<p>This field contains the principal diagnosis code.</p>
DWIPDIS817	DX2	Other Diagnosis 1	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS818	DX3	Other Diagnosis 2	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS819	DX4	Other Diagnosis 3	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS820	DX5	Other Diagnosis 4	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS821	DX6	Other Diagnosis 5	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS822	DX7	Other Diagnosis 6	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS823	DX8	Other Diagnosis 7	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS824	DX9	Other Diagnosis 8	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS825	DX10	Other Diagnosis 9	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>
DWIPDIS826	DX11	Other Diagnosis 10	VARCHAR2	10	<p><b>Description:</b> This field contains an additional ICD diagnosis code.</p>

## REF\_IPDISCHARGE

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWIPDIS827	DX12	Other Diagnosis 11	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS828	DX13	Other Diagnosis 12	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS829	DX14	Other Diagnosis 13	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS830	DX15	Other Diagnosis 14	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS831	DX16	Other Diagnosis 15	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS832	DX17	Other Diagnosis 16	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS833	DX18	Other Diagnosis 17	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS834	DX19	Other Diagnosis 18	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS835	DX20	Other Diagnosis 19	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS836	DX21	Other Diagnosis 20	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS837	DX22	Other Diagnosis 21	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS838	DX23	Other Diagnosis 22	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS839	DX24	Other Diagnosis 23	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS840	DX25	Other Diagnosis 24	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS841	DX26	Other Diagnosis 25	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS842	DX27	Other Diagnosis 26	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS843	DX28	Other Diagnosis 27	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS844	DX29	Other Diagnosis 28	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS845	DX30	Other Diagnosis 29	VARCHAR2	10	<b>Description:</b> This field contains an additional ICD diagnosis code.
DWIPDIS846	OP1	ICD-9-CM Procedure Code 1	VARCHAR2	4	<b>Description:</b> This field contains the first ICD-9 procedure code. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.
DWIPDIS847	OP2	ICD-9-CM Procedure Code 2	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS848	OP3	ICD-9-CM Procedure Code 3	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS849	OP4	ICD-9-CM Procedure Code 4	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS850	OP5	ICD-9-CM Procedure Code 5	VARCHAR2	4	This field contains an additional ICD-9 procedure code.

REF_IPDISCHARGE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWIPDIS851	OP6	ICD-9-CM Procedure Code 6	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS852	OP7	ICD-9-CM Procedure Code 7	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS853	OP8	ICD-9-CM Procedure Code 8	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS854	OP9	ICD-9-CM Procedure Code 9	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS855	OP10	ICD-9-CM Procedure Code 10	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS856	OP11	ICD-9-CM Procedure Code 11	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS8557	OP12	ICD-9-CM Procedure Code 12	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS858	OP13	ICD-9-CM Procedure Code 13	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS859	OP14	ICD-9-CM Procedure Code 14	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS860	OP15	ICD-9-CM Procedure Code 15	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS861	OP16	ICD-9-CM Procedure Code 16	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS862	OP17	ICD-9-CM Procedure Code 17	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS863	OP18	ICD-9-CM Procedure Code 18	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS864	OP19	ICD-9-CM Procedure Code 19	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS865	OP20	ICD-9-CM Procedure Code 20	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS866	OP21	ICD-9-CM Procedure Code 21	VARCHAR2	4	This field contains an additional ICD-9 procedure code.

REF_IPDISCHARGE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWIPDIS867	OP22	ICD-9-CM Procedure Code 22	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS868	OP23	ICD-9-CM Procedure Code 23	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS869	OP24	ICD-9-CM Procedure Code 24	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS870	OP25	ICD-9-CM Procedure Code 25	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS871	OP26	ICD-9-CM Procedure Code 26	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS872	OP27	ICD-9-CM Procedure Code 27	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS873	OP28	ICD-9-CM Procedure Code 28	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS874	OP29	ICD-9-CM Procedure Code 29	VARCHAR2	4	This field contains an additional ICD-9 procedure code.
DWIPDIS875	OP30	ICD-9-CM Procedure Code 30	VARCHAR2	4	This field contains an additional ICD-9 procedure code.

## Line Processing Indicator Codes (Medicare)

The Medicare line processing indicator codes reference data set ([REF\\_LINE\\_PROCESSING\\_IND](#)) includes all valid Medicare line processing indicator code values and descriptions and links to the medical claims data.

REF_LINE_PROCESSING_IND					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWLPIND801	ID	Line Processing Indicator Code ID	NUMBER	10	<p><b>Description:</b> This field contains an ID number that uniquely identifies a line processing indicator code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWLPIND802	CODE	Line Processing Indicator Code	VARCHAR2	2	<p><b>Description:</b> This field contains the code on a non-institutional claim indicating to whom payment was made or if the claim was denied.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the Line Processing Indicator Code element (LINE_PROCESSING_INDICATOR_CODE; MC447) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWLPIND803	DESCRIPTION	Line Processing Indicator Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Line Processing Indicator Code element (CODE; DWLPIND802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

## Long-Term Care Coverage Codes (Medicaid)

The Medicaid long-term care coverage codes reference data set ([REF\\_LTCARE\\_COVERAGE](#)) includes all valid Medicaid long-term care coverage values and descriptions and links to the Long-Term Care Coverage Flag elements in the medical and pharmacy membership data.

REF_LTCARE_COVERAGE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWLTCCOV802	CODE	Long-Term Care Coverage Flag Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific long-term care coverage flag.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the LTC Flag element (ME205) reported in the member eligibility file.</p> <p><b>Linkage:</b> This field links to the Long-Term Care Coverage Flag elements (LTCARE_COV_FLAG) in the medical and pharmacy membership data.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>
DWLTCCOV803	DESCRIPTION	Long-Term Care Coverage Flag Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Long-Term Care Coverage Flag Code element (CODE; DWLTCCOV802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Vermont Medicaid.</p> <p><b>Notes:</b> This information pertains only to Medicaid data and is reported by the Department of Vermont Health Access (DVHA).</p>



# Market Category Codes

The market category codes reference data set ([REF\\_MARKET\\_CATEGORY](#)) includes all valid market category code values and descriptions and links to the medical and pharmacy membership data.

REF_MARKET_CATEGORY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMKTC802	CODE	Market Category Code	VARCHAR2	4	<b>Description:</b> This field contains a code that is used to identify a specific market category.  <b>Origin:</b> Code values are contained in the VHCURES collection rule.  <b>Linkage:</b> This field links to the Market Category Code element (MARKET_CATEGORY) in the medical and pharmacy membership data.
DWMKTC803	DESCRIPTION	Market Category Code Description	VARCHAR2	4,000	<b>Description:</b> This field contains the description of the Market Category Code element (CODE; DWMKTC802).  <b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.

## MCO Claim Paid Codes (Medicare)

The Medicare managed care organization (MCO) claim paid codes reference data set ([REF\\_MCO\\_PAID\\_CODE](#)) includes all valid Medicare MCO claim paid code values and descriptions and links to the medical claims data.

REF_MCO_PAID_CODE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMCOPC801	ID	MCO Claim Paid Code ID	NUMBER	10	<p><b>Description:</b> This field contains an ID number that uniquely identifies an MCO claim paid code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWMCOPC802	CODE	MCO Claim Paid Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific MCO claim paid status. This code indicates whether or not a managed care organization (MCO) has paid the provider for an institutional claim.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the MCO Claim Paid Code element (CLAIM_MCO_PAID_SWITCH; MC451) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWMCOPC803	DESCRIPTION	MCO Claim Paid Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the MCO Claim Paid Code element (CODE; DWMCOPC802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

## Medical Claims

The medical claims data set contains one record for each rendered service. All adjustments to the claims have been applied to the data. This table is divided between commercial (**MED\_DETAIL**), Medicaid (**MED\_DETAIL\_MEDICAID**), and Medicare (**MED\_DETAIL\_MEDICARE**) claims. (**Note:** Newly added fields pertaining only to Medicare data have been highlighted at the end of this core table in orange.) When the **MED\_DETAIL** data set is released and organized by service year, the data sets will be appended with a **\_CCYY** suffix to reflect the year of service. For medical claims industry standard coding definitions, please refer to the following websites:

- For Level I HCPCS (CPT) codes, see: <http://www.ama-assn.org/ama/pub/category/3113.html>
- For Level II HCPCS (non-CPT) codes, see: <http://www.cms.hhs.gov/MedHCPCSGenInfo/>
- For ICD-9-CM codes, see: <http://www.cdc.gov/nchs/icd.htm>
- For Revenue codes, see: <http://www.nubc.org/>

MED_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC801	IDN	<b>Medical Claim IDN Assigned by System</b>	NUMBER	20	<b>Description:</b> This field contains the primary ID number for each medical claims record and uniquely identifies the record within the data warehouse.  <b>Origin:</b> This is a value-added field created by Onpoint.
MC802	PAYERID	<b>Payer ID Number</b>	NUMBER	8	<b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.  <b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (MC001) reported by the payer.  <b>Linkage:</b> When approved for release, this field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).
MC002	AFF_PAYER	<b>Affiliated Payer</b>	VARCHAR2	30	<b>Description:</b> When populated, this field contains the payer code (assigned by Onpoint and distributed to submitters) for the reporter's parent company.  <b>Origin:</b> This field is supplied as reported by the payer.  <b>Notes:</b> This field does not contain the National Plan ID (NPI).

MED_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC803	PRODUCT	Product Code (Standardized)	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies the member's type of insurance or insurance product.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint to standardize the reporting of product codes across submitted file types. Its source is the Insurance Type / Product Code element (MC003) reported by the payer in the medical claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Product Codes reference data set using the Product Code element (CODE; DWPROD802).</p>
MC804	ENCRYPT_CLAIM	Encrypted Payer Claim Control Number	VARCHAR2	128	<p><b>Description:</b> This field contains an encryption of the claim number used by the payer to internally track the claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer Claim Control Number element (MC004) reported by the payer.</p> <p><b>Notes:</b> In general, the claim number is associated with all service lines of the bill. Multiple medical records therefore may share the same claim number. This number must apply to the entire claim and be unique within the payer's system. Note that this field has been encrypted upon receipt by Onpoint CDM using the same algorithm across all payers.</p>
MC005	LINE	Line Counter	NUMBER	6	<p><b>Description:</b> This field contains the line number for this service as reported by the payer.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The Line Counter begins with 1 and is incremented by 1 for each additional service line of a claim.</p>
MC805	VERSION	Claim Version	NUMBER	4	<p><b>Description:</b> This field indicates the claim version number.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field is used if the payer adjudicates claims based on a versioning system.</p>
MC006	INS_GROUP	Insured Group or Policy Number	VARCHAR2	50	<p><b>Description:</b> This field contains the insured group or policy number associated with the entity that has purchased the insurance.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> For self-insured individuals, this relates to the purchaser. For the majority of eligibility and claims data, the group relates to the employer. The group number does not uniquely identify the subscriber.</p>

MED_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC806	ENCRYPT_CONTRACT	Double-Encrypted Plan-Specific Contract Number	VARCHAR2	272	<p><b>Description:</b> This field contains a double-encrypted version of the payer-assigned contract number for the subscriber.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the encrypted Plan-Specific Contract Number element (MC008) reported by the payer.</p> <p><b>Notes:</b> This field, encrypted during submission by the payer, has been encrypted again upon receipt by Onpoint CDM using the same algorithm across all payers.</p>
MC009	ENCRYPT_PAT_SEQ	Encrypted Member Suffix or Sequence Number	VARCHAR2	64	<p><b>Description:</b> This field contains a code that uniquely identifies the member within the context of the Member Detail data set's Encrypted Subscriber Social Security Number element (ENCRYPT_ESSN; DWMEM805) or this data set's Encrypted Plan-Specific Contract Number element (ENCRYPT_CONTRACT).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint based on an encryption of the Member Suffix or Sequence Number field (MC009) reported by the payer.</p>
MC807	MEMBERIDN	Member ID Number	NUMBER	22	<p><b>Description:</b> This field contains an ID number that generally represents a unique individual.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Member Detail supporting data set using the Member Record ID Number element (IDN; DWMEM801).</p> <p><b>Notes:</b> This field should not be used to aggregate all records associated with a member.</p>
MC011	REL	Individual Relationship to Subscriber	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's relationship to the subscriber or the insured.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Relationship Codes reference data set using the Individual Relationship to Subscriber Code element (CODE; DWREL802).</p>
MC012	GENDER	Member Gender	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's gender.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Gender Codes reference data set using the Member Gender Code element (CODE; DWGEN802).</p>

## MED\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC809	HIPAA_AGE	Member Age (90+ Aggregate)	NUMBER	3	<p><b>Description:</b> This field contains the member's age.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Member Date of Birth element (MC013) reported by the payer in the medical claims data.</p> <p><b>Notes:</b> This field is calculated during the encryption process as of the Date of Service (From) element (FIRST_SVC_DATE; MC059). For children under the age of 1, this value will be 0. If no date of birth is available, this value will be -1. In observance of HIPAA regulations, individuals who are 90 years of age or older will be aggregated and coded as 90.</p>
MC016	PAT_ZIPCODE	Member ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field contains the member's ZIP code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the ZIP Code element (CODE; DWGEO802).</p>
MC810	PAT_ZIPCODEID	Member ZIP Code ID	NUMBER	20	<p><b>Description:</b> This field contains the ID number for the Member ZIP Code element (PAT_ZIPCODE; MC016).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the Geographic Record ID element (ID; DWGEO801).</p> <p><b>Notes:</b> While the required format is numeric, this field is stored in the warehouse as text to preserve any leading zeroes. The ZIPCODEID field was created for efficient processing of large data sets. Use this field when summarizing data by geographic area.</p>
MC814	FIRST_PAID_DATE	First Paid Date	DATE	8	<p><b>Description:</b> This field contains the first paid date associated with the claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Date Service Approved element (MC017) reported by the payer in the medical claims data.</p> <p><b>Notes:</b> While multiple paid dates may occur for the same claim as part of the adjudication process, this field contains the first paid date associated with the claim. For claims that were not adjusted, this is the actual paid date.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC815	FIRST_PAID_DATEID	First Paid Date ID Number	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the First Paid Date element (FIRST_PAID_DATE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC819	LAST_PAID_DATE	Last Paid Date	DATE	8	<p><b>Description:</b> This field contains the last paid date associated with the claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Date Service Approved element (MC017) reported by the payer in the medical claims data.</p> <p><b>Notes:</b> While multiple paid dates may occur for the same claim as part of the adjudication process, this field contains the last paid date associated with the claim. For claims that were not adjusted, this is the actual paid date.</p>
MC820	LAST_PAID_DATEID	Last Paid Date ID Number	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Last Paid Date element (LAST_PAID_DATE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC018	ADMIT_DATE	Admission Date	DATE	8	<p><b>Description:</b> This field contains the date of the inpatient admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date element (DAY; DWDAT802).</p> <p><b>Notes:</b> This field is inconsistently reported across payers; it may be underreported on inpatient claims and sometimes reported on outpatient claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC824	ADMIT_DATEID	Admission Date ID Number	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Admission Date element (ADMIT_DATE; MC018).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC019	ADMIT_HOUR	Admission Hour	NUMBER	4	<p><b>Description:</b> This field indicates the hour and minutes of the inpatient admission to the hospital.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field uses military-time format. Valid codes are 0000 – 2359.</p>
MC020	ADMIT_TYPE	Admission Type	NUMBER	5	<p><b>Description:</b> This field records the type of admission for all inpatient hospital bills.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Admission Type Codes reference data set using the Admission Type Code element (CODE; DWADMT802).</p> <p><b>Notes:</b> Many data reporters do not capture this information.</p>
MC021	ADMIT_SOURCE	Admission Source	VARCHAR2	2	<p><b>Description:</b> This field records the source of admission for all inpatient hospital bills.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Admission Source Codes reference data set using the Admission Source Code element (CODE; DWADMS802).</p> <p><b>Notes:</b> Many data reporters do not capture this information.</p>
MC022	DISCH_HOUR	Discharge Hour	NUMBER	2	<p><b>Description:</b> This field indicates the hour of the inpatient discharge from the hospital.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field uses military-time format. Valid codes are 00 – 23.</p>



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC023	DISCH_STATUS	Discharge Status	NUMBER	2	<p><b>Description:</b> This field contains a code that indicates the patient's discharge status.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Discharge Status Codes reference data set using the Discharge Status Code element (CODE; DWDISS802).</p> <p><b>Notes:</b> This field is inconsistently reported across data reporters; it may be underreported on inpatient records and sometimes reported on outpatient records.</p>
MC826	SVC_PRVIDN	Service Provider ID Number	NUMBER	20	<p><b>Description:</b> This field contains the service provider ID number.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Provider Detail data set using the Provider ID Number element (IDN; DWPRVD801).</p> <p><b>Notes:</b> This field cannot be used to aggregate all claims associated with a provider.</p>
MC036	BILL_TYPE	Type of Bill (Institutional)	VARCHAR2	3	<p><b>Description:</b> This field contains a code that indicates the type of bill per the National Uniform Billing Committee's official UB-04 specifications manual.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Bill Type Codes reference data set using the Type of Bill (Institutional) Code element (CODE; DWBILT802).</p> <p><b>Notes:</b> This field is to be reported for institutional claims only. Code values for this field are maintained by the National Uniform Billing Committee and set forth in the official UB-04 specifications manual.</p>
MC037	SVC_SITE_TYPE	Service Site (Professional)	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the type of site where the service was performed.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Service Site Codes reference data set using the Service Site (Professional) Code element (CODE; DWSVS802).</p> <p><b>Notes:</b> This field is to be reported for professional claims only.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC038	CLAIM_STATUS	Claim Status	NUMBER	2	<p><b>Description:</b> This field contains a code that indicates the status of the claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Claim Status Codes reference data set using the Claim Status Code element (CODE; DWCLMS802).</p>
MC039	ADMIT_DX	Admitting Diagnosis	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code that indicates the reason for the inpatient admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> Caution should be used when linking to the Diagnosis Codes reference data set using this element since multiple payers may employ the same codes. This field's related ID element (ADMIT_DXID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC827	ADMIT_DXID	Admitting Diagnosis ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Admitting Diagnosis element (ADMIT_DX; MC039).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC040	ECODE_DX	External Cause of Injury (ECI) Code #1	VARCHAR2	10	<p><b>Description:</b> This field describes an injury, poisoning, or adverse effect using an ICD-9 external cause of injury code diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (ECODE_DXID) is a more appropriate link to the Diagnosis Codes reference data set. Users should search the other diagnosis fields to identify all submitted external cause of injury codes. Note that the same external cause of injury code may be reported in this field and in an Other Diagnosis field, depending upon the data reporter.</p>
MC828	ECODE_DXID	ECI Code ID Number	VARCHAR2	10	<p>This value-added field contains the ID number for the External Cause of Injury (ECI) Code #1 element (ECODE_DX; MC040). This field links to the Diagnosis Codes reference data set using the Diagnosis Record ID Number element (ID; DWDX801).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC041	DX1	Principal Diagnosis	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for the principal diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX1ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC829	DX1ID	Principal Diagnosis ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Principal Diagnosis element (DX1; MC041).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC042	DX2	Other Diagnosis #1	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for a secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX2ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC830	DX2ID	Other Diagnosis #1 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #1 element (DX2; MC042).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC043	DX3	Other Diagnosis #2	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX3ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC831	DX3ID	Other Diagnosis #2 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #2 element (DX3; MC043).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC044	DX4	Other Diagnosis #3	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX4ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC832	DX4ID	Other Diagnosis #3 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #3 element (DX4; MC044).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC045	DX5	Other Diagnosis #4	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX5ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC833	DX5ID	Other Diagnosis #4 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #4 element (DX5; MC045).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC046	DX6	Other Diagnosis #5	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX6ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC834	DX6ID	Other Diagnosis #5 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #5 element (DX6; MC046).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC047	DX7	Other Diagnosis #6	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX7ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC835	DX7ID	Other Diagnosis #6 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #6 element (DX7; MC047).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC048	DX8	Other Diagnosis #7	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX8ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC836	DX8ID	Other Diagnosis #7 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #7 element (DX8; MC048).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC049	DX9	Other Diagnosis #8	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX9ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC837	DX9ID	Other Diagnosis #8 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #8 element (DX9; MC049).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC050	DX10	Other Diagnosis #9	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX10ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC838	DX10ID	Other Diagnosis #9 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #9 element (DX10; MC050).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC051	DX11	<b>Other Diagnosis #10</b>	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX11ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC839	DX11ID	<b>Other Diagnosis #10 ID Number</b>	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #10 element (DX11; MC051).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC052	DX12	<b>Other Diagnosis #11</b>	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX12ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>
MC840	DX12ID	<b>Other Diagnosis #11 ID Number</b>	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #11 element (DX12; MC052).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC053	DX13	<b>Other Diagnosis #12</b>	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Code element (CODE; DWDX802).</p> <p><b>Notes:</b> This field's related ID element (DX13ID) is a more appropriate link to the Diagnosis Codes reference data set.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC841	DX13ID	Other Diagnosis #12 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #12 element (DX13; MC053).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC054	REV	Revenue Center Code	VARCHAR2	4	<p><b>Description:</b> This field contains the revenue center code for hospital claims as reported per the National Uniform Billing Committee's official UB-04 specifications manual.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Revenue Center Codes reference data set using the Revenue Center Code element (CODE; DWREV802).</p>
MC055	CPT	CPT Procedure Code	VARCHAR2	10	<p><b>Description:</b> This field contains the HCPCS or CPT code for the performed procedure.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the CPT Codes reference data set using the CPT Code element (CODE; DWCPT802).</p> <p><b>Notes:</b> Since many data reporters continue to use local codes, a separate CPT codes reference data set is provided and includes all valid nonstandard and locally defined values reported by payers. These must be taken into consideration when selecting records for a specific type of procedure. It is recommended that the Procedure Code ID element (CPTID) be used when linking to the CPT Codes reference data set.</p>
MC842	CPTID	CPT Procedure Code ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the CPT Procedure Code element (CPT; MC055).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the CPT Codes reference data set using the CPT Code ID element (ID; DWCPT801).</p>



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC056	CPT_MOD1	CPT Procedure Modifier #1	VARCHAR2	2	<p><b>Description:</b> This field identifies a CPT procedure modifier, which is used to indicate that a service or procedure has been altered by some specific circumstance but has not changed in its definition or code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the CPT Modifier Codes reference data set using the CPT Modifier Code element (CODE; DWCPTM802).</p> <p><b>Notes:</b> Modifiers may be used to indicate that a service or procedure has both a professional and a technical component, that only part of a service was performed, that a bilateral procedure was performed, or that a service or procedure was provided more than once. A procedure modifier is required when a modifier clarifies or improves the reporting accuracy of the associated procedure code.</p>
MC843	CPT_MOD1ID	CPT Procedure Modifier #1 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the CPT Procedure Modifier #1 element (CPT_MOD1; MC056).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the CPT Modifier Codes reference data set using the CPT Procedure Modifier ID element (ID; DWCPTM801).</p>
MC057	CPT_MOD2	CPT Procedure Modifier #2	VARCHAR2	2	<p><b>Description:</b> This field identifies a CPT procedure modifier, which is used to indicate that a service or procedure has been altered by some specific circumstance but has not changed in its definition or code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the CPT Modifier Codes reference data set using the CPT Modifier Code element (CODE; DWCPTM802).</p> <p><b>Notes:</b> Modifiers may be used to indicate that a service or procedure has both a professional and a technical component, that only part of a service was performed, that a bilateral procedure was performed, or that a service or procedure was provided more than once. A procedure modifier is required when a modifier clarifies or improves the reporting accuracy of the associated procedure code.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC844	CPT_MOD2ID	CPT Procedure Modifier #2 ID Number	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the CPT Procedure Modifier #2 element (CPT_MOD2; MC057).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the CPT Modifier Codes reference data set using the CPT Procedure Modifier ID element (ID; DWCPTM801).</p>
MC058	ICD9_OP	Principal ICD-9-CM Procedure Code	VARCHAR2	4	
MC059	FIRST_SVC_DATE	Date of Service (From)	DATE	8	<p><b>Description:</b> This field contains the first date of service for this service line.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date element (DAY; DWDAT802).</p>
MC845	FIRST_SVC_DATEID	Date of Service (From) ID Number	NUMBER	10	
MC060	LAST_SVC_DATE	Date of Service (Through)	DATE	8	<p><b>Description:</b> This field contains the last date of service for this service line.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date element (DAY; DWDAT802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC849	LAST_SVC_DATEID	Date of Service (Through) ID Number	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Date of Service (Through) element (LAST_SVC_DATE; MC060).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC061	QTY	Quantity	NUMBER	10,2	<p><b>Description:</b> This field contains a count of performed services.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field may be negative. This field must be used with caution because the type of units may vary based upon the service performed. For example, one anesthesia unit may equal 10 minutes, while one ambulance transportation unit may equal one mile.</p>
MC062	CHARGE	Charge Amount	NUMBER	10,2	<p><b>Description:</b> This field contains the total charges for the service.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This is a money field containing dollars and cents. This field may contain a negative value.</p>
MC063	PAID	Paid Amount	NUMBER	10,2	<p><b>Description:</b> This field contains the total dollar amount paid to the provider, including all health plan payments and excluding withhold amounts and all member payments.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This is a money field containing dollars and cents. This field may contain a negative value.</p>
MC064	PREPAID	Prepaid Amount	NUMBER	10,2	<p><b>Description:</b> This field contains the fee for service equivalent that would have been paid by the healthcare claims processor for a specific service if the service had not been capitated.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> Capitated services are services rendered by a provider through a contract under which payments are based upon a fixed dollar amount for each member on a monthly basis. Note that the provider did not receive this payment. Any payment for this service was made through capitation, which is not captured in this database. This is a money field containing dollars and cents. This field may contain a negative value.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC065	COPAY	<b>Copay Amount</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the preset, fixed dollar amount payable by a member, often on a per-visit/-service basis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> Not all carriers can distinguish between the mutually exclusive fields of Copay Amount and Coinsurance Amount (COINSURANCE; MC066). To determine the total out-of-pocket/member responsibility for this service, you must sum these two fields with the Deductible Amount (DEDUCTIBLE; MC067). This is a money field containing dollars and cents. This field may contain a negative value.</p>
MC066	COINSURANCE	<b>Coinsurance Amount</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the dollar amount that a member must pay toward the cost of a covered service (often stipulated as a cost-sharing ratio).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> In many health insurance plans, the member's coinsurance responsibility is capped after a certain dollar amount of eligible expenses has been incurred. Not all carriers can distinguish between the mutually exclusive fields of Copay Amount (COPAY; MC065) and Coinsurance Amount. To determine the total out-of-pocket/member responsibility for this service, you must sum these two fields with the Deductible Amount (DEDUCTIBLE; MC067). This is a money field containing dollars and cents. This field may contain a negative value.</p>
MC067	DEDUCTIBLE	<b>Deductible Amount</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the dollar amount that a member must pay before health plan benefits will begin to reimburse for services. It is usually an annual amount of all healthcare costs that are not covered by the member's insurance plan.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> To determine the total out-of-pocket/member responsibility for this service, you must sum this field with both Copay Amount (COPAY; MC065) and Coinsurance Amount (COINSURANCE; MC066). This is a money field containing dollars and cents. This field may contain a negative value.</p>
MC069	DISCH_DATE	<b>Discharge Date</b>	DATE	8	<p><b>Description:</b> This field contains the date of the inpatient discharge.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date element (DAY; DWDAT802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC850	DISCH_DATEID	Discharge Date ID Number	NUMBER	20	<p><b>Description:</b> This field contains the ID number for the Discharge Date element (DISCH_DATE; MC069).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC852	LENGTH_OF_STAY	Length of Stay	NUMBER	5	<p><b>Description:</b> This field contains the length of stay (in days) for an inpatient claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint and calculated by subtracting the Admission Date (ADMIT_DATE; MC018) from the Discharge Date (DISCH_DATE; MC069).</p> <p><b>Notes:</b> A one-day length of stay is reported if the patient was admitted and discharged on the same day or if the patient was admitted on one day and discharged on the following day. This field is populated on the first claim line. If a claim has multiple records, the length of stay will be 0 on all but the first record for that stay.</p>
MC071	DRG	DRG Submitted by Payer	VARCHAR2	10	<p><b>Description:</b> This field contains the DRG submitted by the payer for this claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> When the preferred CMS methodology is used for grouping, this field contains only the DRG. When the All Payer DRG system is used, this field contains three components and uses the format of ADRG-X, where a constant of A is the prefix, followed by the three-digit DRG, followed by a dash and then the severity level (indicated here by X).</p>
MC072	DRG_VERSION	Version of DRG Grouper Used	VARCHAR2	2	<p><b>Description:</b> This field contains the version number of the grouper used to assign the DRG.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>
MC073	APC	APC Submitted by Payer	VARCHAR2	5	<p><b>Description:</b> This field contains the APC submitted by the payer for this claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>
MC074	APC_VERSION	Version of APC Grouper Used	VARCHAR2	2	<p><b>Description:</b> This field contains the version number of the grouper used to assign the APC.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC075	NDC	National Drug Code	VARCHAR2	11	<p><b>Description:</b> This field contains the National Drug Code for this claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> Each drug product listed under Section 510 of the Federal Food, Drug, and Cosmetic Act is assigned a unique 10-digit, three-segment number. This number, known as the National Drug Code (NDC), identifies the labeler/vendor, product, and trade package size. The first segment, the labeler/vendor code, is assigned by the FDA. A labeler is any firm that manufactures, repacks, or distributes a drug product. The second segment, the product code, identifies a specific strength, dosage form, and formulation for a particular firm. The third segment, the package code, identifies package sizes. Both the product and package codes are assigned by the firm. The NDC will be in one of the following configurations: 4-4-2, 5-3-2, or 5-4-1.</p>
MC853	BILLING_PRVIDN	Billing Provider ID Number	NUMBER	20	<p><b>Description:</b> This field contains the Billing Provider ID Number.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Billing Provider Detail data set using the Billing Provider ID Number element (IDN; DWBPRV801).</p> <p><b>Notes:</b> This field cannot be used to aggregate all claims associated with a provider.</p>
MC854	CLAIM_TYPE	Claim Type	NUMBER	2	<p><b>Description:</b> This field sorts medical claims into type-of-setting or type-of-provider buckets.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Claim Type Codes reference data set using the Claim Type Code element (CODE; DWCLMT802).</p>
MC855	IPDISCHARGE	Inpatient Discharge Identifier	NUMBER	20	<p><b>Description:</b> This field associates all claim lines for a given inpatient stay under one coded value.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Inpatient Discharge Codes reference data set using the Inpatient Discharge Identifier element (IPDISCHARGE; DWIPDIS802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC856	ER_FLAG	ER Flag	VARCHAR2	1	<p><b>Description:</b> This field contains a code that is used to identify specific emergency room (ER) REV or procedure codes within a claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is set only on the specific claim line where an ER REV, procedure code, or place of service was found. To find true outpatient ER visits, select claim lines where this field is Y. Valid codes include:</p> <p>Y ..... ER REV or procedure code found on claim line N ..... No ER REV or procedure code found on claim line</p>
MC859	MEDICARE_COV_FLAG	Medicare Coverage Flag	VARCHAR2	1	<p><b>Description:</b> This field contains a code that indicates whether or not the claim is for a member who also has Medicare coverage.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element (MC003) reported by the payer.</p> <p><b>Notes:</b> Valid codes include: Y (Yes) and N (No).</p>
MC860	USEFLAG	Use Flag	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to include or exclude standard categories of claims for analysis.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Use Flag Codes reference data set using the Use Flag Code element (CODE; DWUSE802).</p>
MC861	EXTRACT_DATE	Warehouse Effective Date	DATE	8	<p><b>Description:</b> This field contains the effective date for the consolidated data warehouse.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> All records within this data set will contain the same date corresponding to the version of the warehouse.</p>
MC844	ENCRYPT_PAT_ACCOUNT	Encrypted Patient Account Number	VARCHAR2	128	<p><b>Description:</b> This field contains an encrypted version of the patient account number or control number assigned by the hospital to track this patient.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Patient Account / Control Number element (MC068) reported by the payer.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC212	COS	Category of Service	NUMBER	11	<p><b>Description:</b> This field identifies the member's Medicaid category of service.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> When approved for release, this field links to the Category of Service Codes reference data set using the Category of Service Code element (CODE; DWCOS802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
MC201	AID_CATEGORY	Aid Category	VARCHAR2	2	<p><b>Description:</b> This field identifies the member's Medicaid aid category based on service date.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> When approved for release, this field links to the Aid Category Codes reference data set using the Aid Category Code element (CODE; DWAIDCAT802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
MC213	TOS	Type of Service	VARCHAR2	2	<p><b>Description:</b> This field identifies the service line's type of service (TOS) indicator.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> When approved for release, this field links to the Type of Service Codes reference data set using the Type of Service Code element (CODE; DWTOS802).</p> <p><b>Notes:</b> While this indicator is used primarily for data purposes, it may affect payment in some instances. All HCPCS codes have a corresponding TOS indicator. This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
MC215	FUNDING_SOURCE	Funding Source	VARCHAR2	2	<p><b>Description:</b> This field identifies the Medicaid funding source.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> When approved for release, this field links to the Funding Source Codes reference data set using the Funding Source Code element (CODE; DWFUNDSRC802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC216	CLAIM_TYPE_MCD	Claim Type (Medicaid)	VARCHAR2	2	<p><b>Description:</b> This field identifies the type of Medicaid claim.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> When approved for release, this field links to the Claim Type Codes (Medicaid) reference data set using the Claim Type (Medicaid) Code element (CODE; DWCLMTMCD802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
MC862	SUBMITTER_SOURCE_ID	Submitter Source	NUMBER	2	<p><b>Description:</b> This field identifies the type of submitter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (MC001) submitted in the medical claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Submitter Source Codes reference data set using the Submitter Source Code element (CODE; DWSUBSRC802).</p>
MC863	PLAN_TYPE_ID	Plan Type	NUMBER	2	<p><b>Description:</b> This field identifies the type of plan.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element (MC003) reported by the payer in the pharmacy claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Plan Type Codes reference data set using the Plan Type Code element (CODE; DWPLANT802).</p>
MC864	AGE_65_FLAG	65 and Over Flag	VARCHAR2	1	<p><b>Description:</b> This field identifies whether the member is 65 years of age or older.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is based on the Member Age (90+ Aggregate) field (HIPAA_AGE), which is derived from the date of birth submitted by the payer.</p>
MC865	OUT_OF_STATE_FLAG	Out-of-State Flag	VARCHAR2	1	<p><b>Description:</b> This field identifies whether the member is domiciled within the state of Vermont.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is based on the Member ZIP code (PAT_ZIPCODE; MC016) reported by the submitter in the medical claims data.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC866	DENIED_CLAIM_FLAG	<b>Denied Flag</b>	VARCHAR2	1	<p><b>Description:</b> This field identifies fully denied claims.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is based on the Claim Status (CLAIM_STATUS; MC038) field reported by the submitter in the medical claims data. It designates a claim as denied only if all lines were denied.</p>
MC867	PAID_AS_SECONDARY_FLAG	<b>Secondary Flag</b>	VARCHAR2	1	<p><b>Description:</b> This field identifies claims that have been paid as secondary.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is based on the Claim Status (CLAIM_STATUS; MC038) field reported by the submitter in the medical claims data. It marks a claim as a secondary payment only if all lines were paid as secondary.</p>
MC868	MEDICARE_FLAG	<b>Medicare Flag</b>	VARCHAR2	1	<p><b>Description:</b> This field identifies Medicare products.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is based on the Insurance Type / Product Code element (MC003) reported by the payer in the medical claims data.</p>
MC869	ORPHANED_ADJUSTMENT_FLAG	<b>Adjustment Flag</b>	VARCHAR2	1	<p><b>Description:</b> This field identifies adjustments that could not be matched to a paid-as-primary, paid-as-secondary, or denied claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>
MC870	ATTENDING_PROVIDER_ID	<b>Attending Provider ID Number</b>	NUMBER	20	<p><b>Description:</b> This field contains the Attending Provider ID Number.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field links to the Provider Detail data set using the Provider ID Number element (IDN; DWPRVD801). This field cannot be used to aggregate all claims associated with a provider.</p>
MC450	EXTERNAL_MEMBER_IDENTIFIER	<b>External Member Identifier</b>	VARCHAR2	15	<p><b>Description:</b> This field contains an identifier assigned by Medicare.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC825-2	ECODE_DXID2	External Cause of Injury Code #2 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the External Cause of Injury Code #2 element (ECODE_DX2; MC040A).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC040A	ECODE_DX2	External Cause of Injury Code #2	VARCHAR2	10	<p><b>Description:</b> This field describes an additional injury, poisoning, or adverse effect using an ICD-9 external cause of injury code diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> Users should search the other diagnosis fields to identify all submitted external cause of injury codes. Note that the same external cause of injury code may be reported in this field and in an Other Diagnosis field, depending upon the data reporter.</p>
MC825-3	ECODE_DXID3	External Cause of Injury Code #3 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the External Cause of Injury Code #3 element (ECODE_DX3; MC040B).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC040B	ECODE_DX3	External Cause of Injury Code #3	VARCHAR2	10	<p><b>Description:</b> This field describes an additional injury, poisoning, or adverse effect using an ICD-9 external cause of injury code diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> Users should search the other diagnosis fields to identify all submitted external cause of injury codes. Note that the same external cause of injury code may be reported in this field and in an Other Diagnosis field, depending upon the data reporter.</p>
MC058A	ICD9OP2	Other ICD-9-CM Procedure Code #1	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC058B	ICD9OP3	Other ICD-9-CM Procedure Code #2	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058C	ICD9OP4	Other ICD-9-CM Procedure Code #3	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058D	ICD9OP5	Other ICD-9-CM Procedure Code #4	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058E	ICD9OP6	Other ICD-9-CM Procedure Code #5	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058F	ICD9OP7	Other ICD-9-CM Procedure Code #6	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058G	ICD9OP8	Other ICD-9-CM Procedure Code #7	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC058H	ICD9OP9	Other ICD-9-CM Procedure Code #8	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058I	ICD9OP10	Other ICD-9-CM Procedure Code #9	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058J	ICD9OP11	Other ICD-9-CM Procedure Code #10	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058K	ICD9OP12	Other ICD-9-CM Procedure Code #11	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058L	ICD9OP13	Other ICD-9-CM Procedure Code #12	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058M	ICD9OP14	Other ICD-9-CM Procedure Code #13	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC058N	ICD9OP15	Other ICD-9-CM Procedure Code #14	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058O	ICD9OP16	Other ICD-9-CM Procedure Code #15	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058P	ICD9OP17	Other ICD-9-CM Procedure Code #16	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058Q	ICD9OP18	Other ICD-9-CM Procedure Code #17	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058R	ICD9OP19	Other ICD-9-CM Procedure Code #18	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058S	ICD9OP20	Other ICD-9-CM Procedure Code #19	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC058T	ICD9OP21	Other ICD-9-CM Procedure Code #20	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058U	ICD9OP22	Other ICD-9-CM Procedure Code #21	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058V	ICD9OP23	Other ICD-9-CM Procedure Code #22	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058W	ICD9OP24	Other ICD-9-CM Procedure Code #23	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC058X	ICD9OP25	Other ICD-9-CM Procedure Code #24	VARCHAR2	4	<p><b>Description:</b> This field identifies an additional ICD-9-CM Procedure Code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The decimal point is not coded. This field generally is available only on inpatient hospital claims. It is not consistently reported by data reporters.</p>
MC824-14	DX14ID	Other Diagnosis #13 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #13 element (DX14; MC401).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC401	DX14	Other Diagnosis #13	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-15	DX15ID	Other Diagnosis #14 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #14 element (DX15; MC402).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC402	DX15	Other Diagnosis #14	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-16	DX16ID	Other Diagnosis #15 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #15 element (DX16; MC403).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC403	DX16	Other Diagnosis #15	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-17	DX17ID	Other Diagnosis #16 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #16 element (DX17; MC404).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>



MED_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC404	DX17	Other Diagnosis #16	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-18	DX18ID	Other Diagnosis #17 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #17 element (DX18; MC405).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC405	DX18	Other Diagnosis #17	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-19	DX19ID	Other Diagnosis #18 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #18 element (DX19; MC406).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC406	DX19	Other Diagnosis #18	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-20	DX20ID	Other Diagnosis #19 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #19 element (DX20; MC407).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>

MED_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC407	DX20	Other Diagnosis #19	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-21	DX21ID	Other Diagnosis #20 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #20 element (DX21; MC408).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC408	DX21	Other Diagnosis #20	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-22	DX22ID	Other Diagnosis #21 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #21 element (DX22; MC409).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC409	DX22	Other Diagnosis #21	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-23	DX23ID	Other Diagnosis #22 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #22 element (DX23; MC410).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC410	DX23	Other Diagnosis #22	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-24	DX24ID	Other Diagnosis #23 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #23 element (DX24; MC411).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC411	DX24	Other Diagnosis #23	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC824-25	DX25ID	Other Diagnosis #24 - ID	VARCHAR2	10	<p><b>Description:</b> This field contains the ID number for the Other Diagnosis #24 element (DX25; MC412).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Diagnosis Codes reference data set using the Diagnosis Record ID element (ID; DWDX801).</p>
MC412	DX25	Other Diagnosis #24	VARCHAR2	10	<p><b>Description:</b> This field contains the ICD-9 diagnosis code for an additional secondary diagnosis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC414	POA_DX_IND_CODE 1	Principal Diagnosis - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not the Principal Diagnosis (MC041; DX1) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC415	POA_DX_IND_CODE 2	Other Diagnosis #1 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #1 (MC042; DX2) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC416	POA_DX_IND_CODE 3	Other Diagnosis #2 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #2 (MC043; DX3) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC417	POA_DX_IND_CODE 4	Other Diagnosis #3 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #3 (MC044; DX4) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC418	POA_DX_IND_CODE 5	Other Diagnosis #4 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #4 (MC045; DX5) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC419	POA_DX_IND_CODE 6	Other Diagnosis #5 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #5 (MC046; DX6) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC420	POA_DX_IND_CODE 7	Other Diagnosis #6 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #6 (MC047; DX7) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC421	POA_DX_IND_CODE 8	Other Diagnosis #7 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #7 (MC048; DX8) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC422	POA_DX_IND_CODE 9	Other Diagnosis #8 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #8 (MC049; DX9) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC423	POA_DX_IND_CODE 10	Other Diagnosis #9 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #9 (MC050; DX10) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC424	POA_DX_IND_CODE 11	Other Diagnosis #10 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #10 (MC051; DX11) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC425	POA_DX_IND_CODE 12	Other Diagnosis #11 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #11 (MC052; DX12) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC426	POA_DX_IND_CODE 13	Other Diagnosis #12 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #12 (DX13; MC053) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC427	POA_DX_IND_CODE 14	Other Diagnosis #13 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #13 (DX14; MC401) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC428	POA_DX_IND_CODE 15	Other Diagnosis #14 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #14 (DX15; MC402) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC429	POA_DX_IND_CODE 16	Other Diagnosis #15 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #15 (DX16; MC403) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC430	POA_DX_IND_CODE 17	Other Diagnosis #16 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #16 (DX17; MC404) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC431	POA_DX_IND_CODE 18	Other Diagnosis #17 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #17 (DX18; MC405) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC432	POA_DX_IND_CODE 19	Other Diagnosis #18 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #18 (DX19; MC406) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC433	POA_DX_IND_CODE 20	Other Diagnosis #19 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #19 (DX20; MC407) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC434	POA_DX_IND_CODE 21	Other Diagnosis #20 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #20 (DX21; MC408) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC435	POA_DX_IND_CODE 22	Other Diagnosis #21 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #21 (DX22; MC409) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC436	POA_DX_IND_CODE 23	Other Diagnosis #22 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #22 (DX23; MC410) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC437	POA_DX_IND_CODE 24	Other Diagnosis #23 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #23 (DX24; MC411) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC438	POA_DX_IND_CODE 25	Other Diagnosis #24 - POA Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not Other Diagnosis #24 (DX25; MC412) was present at the time of admission.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Present on Admission Indicator Codes reference data set using the Present on Admission (POA) Indicator Code field (CODE; DWPOA802).</p>
MC439	DRG_OUTLIER_PAY MENT_AMT	DRG Outlier Payment Amount	NUMBER	10	<p><b>Description:</b> For an institutional claim, this field contains the additional payment amount approved by the Peer Review Organization due to an outlier situation for a beneficiary's stay under the prospective payment system, which has been classified into a specific diagnosis related group.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC440	CMS_CLAIM_TYPE	<b>Claim Type (Medicare) Code</b>	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify the type of claim record being processed.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Claim Type Codes (Medicare) reference data set using the Claim Type (Medicare) Code element (CODE; DWCLMTMCR802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC441	CLAIM_UTILIZATION_DAY_COUNT	<b>Claim Utilization Day Count</b>	NUMBER	22	<p><b>Description:</b> On an institutional claim, this field identifies the number of covered days of care that are chargeable to Medicare facility utilization that includes full days, coinsurance days, and lifetime reserve days.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Notes:</b> This field excludes any days classified as non-covered, leave of absence days, and the day of discharge or death.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC443	CLAIM_DRG_OUTLIER_STAY_CODE	<b>DRG Outlier Stay Code</b>	VARCHAR2	2	<p><b>Description:</b> For an institutional claim, this field contains a code that indicates a beneficiary stay under the prospective payment system that, although classified into a specific diagnosis related group, has an unusually long length (day outlier) or exceptionally high cost (cost outlier).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the DRG Outlier Stay Codes reference data set using the DRG Outlier Stay Code element (CODE; DWDRGOS802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC444	LINE_PRIMARY_PAYER_PAID_AMT	<b>Line Primary Payer Paid Amount</b>	NUMBER	10	<p><b>Description:</b> This field contains the amount of a payment – made on behalf of a Medicare beneficiary by a primary payer other than Medicare – that the provider is applying to covered Medicare charges on a non-institutional claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC445	NON_PMT_REASON_CODE	Non-Payment Reason Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the reason that no Medicare payment was made for services on an institutional claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Medicare Non-Payment Reason Codes reference data set using the Non-Payment Reason Code element (CODE; DWNPR802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC446	PRIMARY_PAYER_CODE	Primary Payer Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that specifies a federal non-Medicare program or other source that has primary responsibility for the payment of the Medicare beneficiary's medical bills relating to the line item service on the non-institutional claim.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Primary Payer Codes reference data set using the Primary Payer Code element (CODE; DWPPC802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC447	LINE_PROCESSING_INDICATOR_CODE	Line Processing Indicator Code	VARCHAR2	2	<p><b>Description:</b> This field contains the code on a non-institutional claim indicating to whom payment was made or if the claim was denied.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Line Processing Indicator Codes reference data set using the Line Processing Indicator Code element (CODE; DWLPIND802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC448	CLAIM_COINSURANCE_DAYS	Claim Coinsurance Days	NUMBER	22	<p><b>Description:</b> This field contains the count of the total number of coinsurance days involved with the beneficiary's stay in a facility.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>
MC449	CLAIM_FINAL_BILL_CODE	Final Bill Code	NUMBER	2	<p><b>Description:</b> This field contains a code that identifies the type of claim record being processed with respect to payment (e.g., debit/credit indicator; interim/final indicator; etc.).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Final Bill Codes reference data set using the Final Bill Code element (CODE; DWFBC802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC451	CLAIM_MCO_PAID_SWITCH	MCO Claim Paid Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates whether or not a managed care organization (MCO) has paid the provider for an institutional claim.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the MCO Claim Paid Codes reference data set using the MCO Claim Paid Code element (CODE; DWMCOPC802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC452	NONCOVERED_CHARGE_AMT	Noncovered Charge Amount	NUMBER	10	<p><b>Description:</b> This field identifies the charge amount related to a revenue center code for services that are not covered by Medicare.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC454	LINE_HCFA_TYPE_OF_SERVICE_CODE	Type of Service (Medicare) Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the type of service, as defined in the CMS Medicare Carrier Manual, for this line item on a non-institutional claim.</p> <p><b>Origin:</b> The field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Type of Service (Medicare) Codes reference data set using the Type of Service (Medicare) Code element (CODE; DWTOSMCR802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC455	DATA_SOURCE_TYPE	Data Source Type Code	VARCHAR2	3	<p><b>Description:</b> This field contains a code that indicates which of the seven MAPCP data types provided by CMS serves as the source for this record.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Data Source Type Codes reference data set using the Data Source Type Code element (CODE; DWDST802).</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC459	ATTENDING_PROVIDER_NPI	Attending Provider NPI	VARCHAR2	12	<p><b>Description:</b> This field contains the NPI of the attending provider (i.e., the individual who has overall responsibility for the patient's medical care and treatment reported in this claim).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC461	OPERATING_PROVIDER_NPI	Operating Provider NPI	VARCHAR2	12	<p><b>Description:</b> This field contains the NPI of the operating provider (i.e., the individual with primary responsibility for performing the surgical procedure(s)).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC462	OTHER_PROVIDER_NPI	Other Provider NPI	VARCHAR2	12	<p><b>Description:</b> This field contains the NPI of the other operating provider (i.e., the individual performing a secondary surgical procedure or assisting the operating physician/provider).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field is reported only when information on the Operating Provider also is reported. This information pertains only to Medicare claims.</p>
MC463	ORDERING_PROVIDER_NPI	Ordering Provider NPI	VARCHAR2	12	<p><b>Description:</b> This field contains the NPI of the ordering physician.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC464	REFERRING_PROVIDER_NPI	Referring Provider NPI	VARCHAR2	12	<p><b>Description:</b> This field contains the NPI of the referring provider (i.e., the provider who sends the patient to another provider for services).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC465	ICD9OP_DT	Principal ICD-9-CM Procedure Code - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Principal ICD-9-CM Procedure Code field (ICD9OP; MC058).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC466	ICD9OP_DT2	Other ICD-9-CM Procedure Code #1 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #1 field (ICD9OP2; MC058A).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC467	ICD9OP_DT3	ICD-9-CM Procedure Code #2 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #2 field (ICD9OP3; MC058B).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC468	ICD9OP_DT4	ICD-9-CM Procedure Code #3 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #3 field (ICD9OP4; MC058C).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC469	ICD9OP_DT5	ICD-9-CM Procedure Code #4 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #4 field (ICD9OP5; MC058D).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC470	ICD9OP_DT6	ICD-9-CM Procedure Code #5 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #5 field (ICD9OP6; MC058E).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC471	ICD9OP_DT7	ICD-9-CM Procedure Code #6 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #6 field (ICD9OP7; MC058F).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC472	ICD9OP_DT8	ICD-9-CM Procedure Code #7 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #7 field (ICD9OP8; MC058G).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC473	ICD9OP_DT9	ICD-9-CM Procedure Code #8 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #8 field (ICD9OP9; MC058H).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC474	ICD9OP_DT10	ICD-9-CM Procedure Code #9 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #9 field (ICD9OP10; MC058I).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC475	ICD9OP_DT11	ICD-9-CM Procedure Code #10 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #10 field (ICD9OP11; MC058J).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC476	ICD9OP_DT12	ICD-9-CM Procedure Code #11 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #11 field (ICD9OP12; MC058K).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC477	ICD9OP_DT13	ICD-9-CM Procedure Code #12 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #12 field (ICD9OP13; MC058L).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC478	ICD9OP_DT14	ICD-9-CM Procedure Code #13 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #13 field (ICD9OP14; MC058M).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC479	ICD9OP_DT15	ICD-9-CM Procedure Code #14 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #14 field (ICD9OP15; MC058N).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC480	ICD9OP_DT16	ICD-9-CM Procedure Code #15 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #15 field (ICD9OP16; MC058O).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC481	ICD9OP_DT17	ICD-9-CM Procedure Code #16 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #16 field (ICD9OP17; MC058P).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC482	ICD9OP_DT18	ICD-9-CM Procedure Code #17 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #17 field (ICD9OP18; MC058Q).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC483	ICD9OP_DT19	ICD-9-CM Procedure Code #18 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #18 field (ICD9OP19; MC058R).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC484	ICD9OP_DT20	ICD-9-CM Procedure Code #19 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #19 field (ICD9OP20; MC058S).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC485	ICD9OP_DT21	ICD-9-CM Procedure Code #20 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #20 field (ICD9OP21; MC058T).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC486	ICD9OP_DT22	ICD-9-CM Procedure Code #21 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #21 field (ICD9OP22; MC058U).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC487	ICD9OP_DT23	ICD-9-CM Procedure Code #22 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #22 field (ICD9OP23; MC058V).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>
MC488	ICD9OP_DT24	ICD-9-CM Procedure Code #23 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #23 field (ICD9OP24; MC058W).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC489	ICD9OP_DT25	ICD-9-CM Procedure Code #24 - Date	DATE	8	<p><b>Description:</b> This field identifies the performance date of the procedure specified in the Other ICD-9-CM Procedure Code #24 field (ICD9OP25; MC058X).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
MC465-1	ICD9OP_DTID	Principal ICD-9-CM Procedure Code – Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code - Date element (ICD9OP_DT).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC466-1	ICD9OP_DT2ID	<b>Other ICD-9-CM Procedure Code #1 - Date ID</b>	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #1 - Date element (ICD9OP_DT2).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC467-1	ICD9OP_DT3ID	<b>ICD-9-CM Procedure Code #2 - Date ID</b>	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #2 - Date element (ICD9OP_DT3).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC468-1	ICD9OP_DT4ID	<b>ICD-9-CM Procedure Code #3 - Date ID</b>	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #3 - Date element (ICD9OP_DT4).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC469-1	ICD9OP_DT5ID	<b>ICD-9-CM Procedure Code #4 - Date ID</b>	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #4 - Date element (ICD9OP_DT5).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC470-1	ICD9OP_DT6ID	ICD-9-CM Procedure Code #5 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #5 - Date element (ICD9OP_DT6).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC471-1	ICD9OP_DT7ID	ICD-9-CM Procedure Code #6 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #6 - Date element (ICD9OP_DT7).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC472-1	ICD9OP_DT8ID	ICD-9-CM Procedure Code #7 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #7 - Date element (ICD9OP_DT8).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC473-1	ICD9OP_DT9ID	ICD-9-CM Procedure Code #8 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #8 - Date element (ICD9OP_DT9).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC474-1	ICD9OP_DT10ID	ICD-9-CM Procedure Code #9 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #9 - Date element (ICD9OP_DT10).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC475-1	ICD9OP_DT11ID	ICD-9-CM Procedure Code #10 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #10 - Date element (ICD9OP_DT11).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC476-1	ICD9OP_DT12ID	ICD-9-CM Procedure Code #11 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #11 - Date element (ICD9OP_DT12).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC477-1	ICD9OP_DT13ID	ICD-9-CM Procedure Code #12 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #12 - Date element (ICD9OP_DT13).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC478-1	ICD9OP_DT14ID	ICD-9-CM Procedure Code #13 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #13 - Date element (ICD9OP_DT14).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC479-1	ICD9OP_DT15ID	ICD-9-CM Procedure Code #14 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #14 - Date element (ICD9OP_DT15).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC480-1	ICD9OP_DT16ID	ICD-9-CM Procedure Code #15 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #15 - Date element (ICD9OP_DT16).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC481-1	ICD9OP_DT17ID	ICD-9-CM Procedure Code #16 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #16 - Date element (ICD9OP_DT17).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>

## MED\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC482-1	ICD9OP_DT18ID	ICD-9-CM Procedure Code #17 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #17 - Date element (ICD9OP_DT18).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC483-1	ICD9OP_DT19ID	ICD-9-CM Procedure Code #18 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #18 - Date element (ICD9OP_DT19).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC484-1	ICD9OP_DT20ID	ICD-9-CM Procedure Code #19 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #19 - Date element (ICD9OP_DT20).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC485-1	ICD9OP_DT21ID	ICD-9-CM Procedure Code #20 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #20 - Date element (ICD9OP_DT21).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>

## MED\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
MC486-1	ICD9OP_DT22ID	ICD-9-CM Procedure Code #21 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #21 - Date element (ICD9OP_DT22).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC487-1	ICD9OP_DT23ID	ICD-9-CM Procedure Code #22 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #22 - Date element (ICD9OP_DT23).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC488-1	ICD9OP_DT24ID	ICD-9-CM Procedure Code #23 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #23 - Date element (ICD9OP_DT24).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
MC489-1	ICD9OP_DT25ID	ICD-9-CM Procedure Code #24 - Date ID	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Principal ICD-9-CM Procedure Code #24 - Date element (ICD9OP_DT25).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>

## Medical Membership

The medical membership data set contains one record for each month of medical coverage for an individual. This table is divided between commercial ([MED\\_MEMBERSHIP](#)), Medicaid ([MED\\_MEMBERSHIP\\_MEDICAID](#)), and Medicare ([MED\\_MEMBERSHIP\\_MEDICARE](#)) members. (**Note:** Newly added fields pertaining only to Medicare data have been highlighted at the end of this core table in [orange](#).) When the [MED\\_MEMBERSHIP](#) data set is released and organized by service year, the data sets will be appended with a [\\_CCYY](#) suffix to reflect the year of service.

MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM801	IDN	<b>Medical Membership Record ID Number</b>	NUMBER	20	<b>Description:</b> This field is the primary identification number for each medical membership record.  <b>Origin:</b> This is a value-added field created by Onpoint.
DWM802	PAYERID	<b>Payer ID Number</b>	NUMBER	8	<b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.  <b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (ME001) reported by the payer in the member eligibility data.  <b>Linkage:</b> When approved for release, this field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).
DWMM803	AFF_PAYER	<b>Affiliated Payer</b>	VARCHAR2	30	<b>Description:</b> When populated, this field contains the payer code (assigned by Onpoint and distributed to submitters) for the reporter's parent company.  <b>Origin:</b> This field is supplied as reported by the payer. Its source is the Payer element (ME002) reported in the member eligibility file.  <b>Notes:</b> This field does not contain the National Plan ID (NPI).
DWMM804	PRODUCT	<b>Product Code</b>	VARCHAR2	2	<b>Description:</b> This field contains a code that identifies the member's type of insurance or insurance product.  <b>Origin:</b> This field is supplied as reported by the payer. Its source is the Insurance Type / Product Code element reported by the payer in the member eligibility (ME003) data.  <b>Linkage:</b> When approved for release, this field links to the Product Codes reference data set using the Product Code element (CODE; DWPROD802).

MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM805	MTIME	Membership Year & Month	NUMBER	6	<p><b>Description:</b> This field combines the Year (ME004) and Month (ME005) elements reported by the payer in the member eligibility data into a single field.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field has a format of CCYYMM.</p>
DWMM806	PERIODID	Period ID Number	NUMBER	10	<p><b>Description:</b> This field contains an ID number for the Membership Year &amp; Month element (MTIME).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p>
DWMM807	INS_GROUP	Insured Group or Policy Number	VARCHAR2	50	<p><b>Description:</b> This field contains the insured group or policy number associated with the entity that has purchased the insurance.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Insured Group or Policy Number element (ME006) reported in the member eligibility data.</p> <p><b>Notes:</b> For self-insured individuals, this relates to the purchaser. For the majority of eligibility and claims data, the group relates to the employer. The group number does not uniquely identify the subscriber.</p>
DWMM808	INS_GROUP_NAME	Insured Group Name	VARCHAR2	128	<p><b>Description:</b> This field contains the name of the group that covers the member.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Group Name element (ME032) reported in the member eligibility data.</p> <p><b>Notes:</b> If the member is part of a group of one or part of a non-group policy (i.e., when the Market Category Code [MARKET_CATEGORY] is coded as IND, FCH, GCV, or GS1), this field will be null (or display the value BLANK).</p>
DWMM809	COVERAGE_LEVEL	Coverage Level	VARCHAR2	3	<p><b>Description:</b> This field contains a code that indicates the level of coverage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Coverage Level Code element (ME007) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Coverage Level Codes reference data set using the Coverage Level Code element (CODE; DWCVL802).</p>



MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM810	ENCRYPT_CONTRACT	Double-Encrypted Plan-Specific Contract Number	VARCHAR2	272	<p><b>Description:</b> This field contains a double-encrypted version of the payer-assigned contract number for the subscriber.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. This field's source is the encrypted Plan-Specific Contract Number element (ME009) reported by the payer.</p> <p><b>Notes:</b> This field, encrypted during submission by the payer, has been encrypted again upon receipt by Onpoint CDM using the same algorithm across all payers.</p>
DWMM811	ENCRYPT_PAT_SEQ	Encrypted Member Suffix or Sequence Number	VARCHAR2	64	<p><b>Description:</b> This field contains a code that uniquely identifies the member within the context of the Member Detail data set's Encrypted Subscriber Social Security Number element (ENCRYPT_ESSN) or this data set's Encrypted Plan-Specific Contract Number element (ENCRYPT_CONTRACT).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint based on an encryption of the Member Suffix or Sequence Number element (ME010) reported in the member eligibility data.</p>
DWMM812	MEMBERIDN	Member ID Number	NUMBER	22	<p><b>Description:</b> This field contains an ID number that generally represents a unique individual.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Member Detail supporting data set using the Member Record ID Number element (IDN; DWMEM801).</p> <p><b>Notes:</b> This field should not be used to aggregate all records associated with a member.</p>
DWMM814	REL	Individual Relationship to Subscriber (Standardized)	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's relationship to the subscriber or the insured.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint to standardize the reporting of relationship codes across submitted file types. Its source is the Individual Relationship Code element reported by the payer in the member eligibility (ME012) data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Relationship Codes reference data set using the Individual Relationship to Subscriber Code element (CODE; DWREL802).</p>
DWMM815	GENDER	Member Gender	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's gender.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Member Gender element (ME013) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Gender Codes reference data set using the Member Gender Code element (CODE; DWGEN802).</p>

## MED\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM816	HIPAA_AGE	Member Age (90+ Aggregate)	NUMBER	3	<p><b>Description:</b> This field contains the member's age.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Member Date of Birth element (ME014) reported by the payer in the member eligibility data.</p> <p><b>Notes:</b> This field is calculated during the encryption process as of the first day of the membership month (ME004) and year (ME005) as reported by the payer in the member eligibility data. For children under the age of 1, this value will be 0. If no date of birth is available, this value will be -1. In observance of HIPAA regulations, individuals who are 90 years of age or older will be aggregated and coded as 90.</p>
DWMM818	PAT_ZIPCODE	Member ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field contains the member's ZIP code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Member ZIP Code element (ME017) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the ZIP Code element (CODE; DWGEO802).</p>
DWMM819	PAT_ZIPCODEID	Member ZIP Code ID	NUMBER	20	<p><b>Description:</b> This field contains the ID number for the Member ZIP Code element (PAT_ZIPCODE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the Geographic Record ID element (ID; DWGEO801).</p> <p><b>Notes:</b> While the required format is numeric, this field is stored in the warehouse as text to preserve any leading zeroes. The ZIPCODEID field was created for efficient processing of large data sets. Use this field when summarizing data by geographic area.</p>
DWMM823	MEDICAL_COV_FLAG	Medical Coverage Flag	VARCHAR2	1	<p><b>Description:</b> This field contains a code that indicates whether or not the member has medical coverage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Medical Coverage element (ME018) reported in the member eligibility data.</p> <p><b>Notes:</b> Valid codes include: Y (Yes) and N (No).</p>

## MED\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM824	PRIMARY_INS	Primary Insurance Indicator	NUMBER	2	<p><b>Description:</b> This field contains a code that indicates if the member has primary coverage or instead has secondary/tertiary coverage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Primary Insurance Indicator element (ME028) reported in the member eligibility data.</p> <p><b>Notes:</b> Valid codes include:</p> <p>1..... Yes, primary insurance  2..... No, secondary or tertiary insurance  -1..... Not specified (no primary insurance indicator reported)  -2..... Not valid (invalid primary insurance indicator reported)</p>
DWMM825	COVERAGE_TYPE	Coverage Type	VARCHAR2	3	<p><b>Description:</b> This field contains a code that indicates the type of coverage and is used to distinguish self-funded plans from commercially insured plans.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Coverage Type element (ME029) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Coverage Type Codes reference data set using the Coverage Type Code element (CODE; DWCVT802).</p>
DWMM826	MARKET_CATEGORY	Market Category Code	VARCHAR2	4	<p><b>Description:</b> This field contains a code that indicates the type of policy sold by the insurer.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Market Category Code element (ME030) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Market Category Codes reference data set using the Market Category Code element (CODE; DWMKTC802).</p>
DWMM827	BPMH	Blueprint Medical Home Indicator	VARCHAR2	2	<p><b>Description:</b> This field contains the Blueprint Medical Home (BPMH) Indicator.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the BPMH Indicator element (ME031) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Blueprint Medical Home Indicator Codes reference data set using the Blueprint Medical Home Indicator Code element (CODE; DWBPMH802).</p> <p><b>Notes:</b> Since the Blueprint Medical Home Indicator field is based on data as submitted by payers, its accuracy and completeness cannot be validated.</p>

## MED\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM828	MEDICARE_COV_FLAG	Medicare Coverage Flag	VARCHAR2	1	<p><b>Description:</b> This field contains a code that indicates whether or not the claim is for a member who also has Medicare coverage.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element (ME003) reported by the payer in the member eligibility data.</p> <p><b>Notes:</b> Valid codes include: Y (Yes) and N (No).</p>
DWMM829	USEFLAG	Use Flag	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to indicate the relationship of this membership record to other membership records for the same member and time period.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Use Flag Codes reference data set using the Use Flag Code element (CODE; DWUSE802).</p> <p><b>Notes:</b> If two records have the same member identifiers, the same payer, and the same year and month of eligibility, one record will be flagged as an intra-payer duplicate and should not be used in counting member months. If a member has a membership record for full medical coverage and a membership record for a specific area of coverage (e.g., mental health and substance abuse), the specific coverage area record will be flagged as an inter-payer duplicate. In general, the inter-payer record should not be used when counting member months.</p>
DWMM830	EXTRACT_DATE	Warehouse Effective Date	DATE	8	<p><b>Description:</b> This field contains the effective date for the consolidated data warehouse.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> All records within this data set will contain the same date corresponding to the version of the warehouse.</p>
DWMM831	AID_CATEGORY	Aid Category	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies the member's aid category based on service date.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Aid Category element (ME201) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Aid Category Codes reference data set using the Aid Category Code element (CODE; DWIDCAT802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM832	DUAL_COV_FLAG	Dual Coverage Flag	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies whether or not a member had both Medicaid and Medicare coverage (i.e., dual coverage) for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Dual-Coverage element (ME202) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Dual-Coverage Codes reference data set using the Dual-Coverage Flag Code element (CODE; DWDCOV802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWMM833	FULL_COV_FLAG	Full Coverage Flag	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies whether or not a member had full Medicaid coverage for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Full Medicaid element (ME203) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Full-Coverage Codes reference data set using the Full-Coverage Flag Code element (CODE; DWFCOV802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWMM834	LTCARE_COV_FLAG	Long-Term Care Coverage Flag	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies whether or not a member had long-term care coverage for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the LTC Flag element (ME205) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Long-Term Care Coverage Codes reference data set using the Long-Term Care Coverage Flag Code element (CODE; DWLTCCOV802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM835	FPL	Federal Poverty Level	NUMBER	5,2	<p><b>Description:</b> This field identifies the member's federal poverty level (FPL) for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Federal Poverty Level element (ME206) reported in the member eligibility file.</p> <p><b>Notes:</b> An FPL of 100.00% indicates that the member was living at the FPL; values above and below 100.00% indicate that the member was living above or below, respectively, the federal poverty level. This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWMM836	BLUESA	Blueprint Service Area	NUMBER	4	<p><b>Description:</b> This field contains a code that identifies the member's Blueprint Service Area.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Blueprint Service Area element (ME207) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Blueprint Service Area Codes reference data set using the Blueprint Service Area Code element (CODE; DWBLUESA802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWMM837	CHRONIC_CARE_FLAG	Chronic Care Indicator	NUMBER	2	<p><b>Description:</b> This field contains a code that identifies Medicaid beneficiaries attributed to the Vermont Chronic Care Initiative (VCCI).</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Chronic Care Indicator element (ME211) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Chronic Care Codes reference data set using the Chronic Care Flag Code element (CODE; DWCCARE802).</p> <p><b>Notes:</b> Under the Vermont Chronic Care Initiative program, beneficiaries are enrolled for select conditions; once a condition is managed and under control, beneficiaries become inactive. Given the general health status of the VCCI participant population, beneficiaries often become active again for a different condition. This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWMM838	SUBMITTER_SOURCE_ID	Submitter Source	NUMBER	2	<p><b>Description:</b> This field identifies the type of submitter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (ME001) submitted in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Submitter Source Codes reference data set using the Submitter Source Code element (CODE; DWSUBSRC802).</p>

MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM839	PLAN_TYPE_ID	Plan Type	NUMBER	2	<p><b>Description:</b> This field identifies the type of plan.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element reported by the payer in the member eligibility (ME003) data.</p> <p><b>Notes:</b> When approved for release, this field links to the Plan Type Codes reference data set using the Plan Type Code element (CODE; DWPLANT802).</p>
DWMM840	ELIGFLAG	Medicaid Eligibility Flag	NUMBER	1	<p><b>Description:</b> This DVHA-supplied field identifies whether or not a member is an eligible beneficiary as of the 15th of the month.</p>
DWMM841	AGE_65_FLAG	65 and Over Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field identifies whether the member is 65 years of age or older. This is based on the HIPAA_AGE field, which is derived from the date of birth submitted by the payer.</p>
DWMM842	OUT_OF_STATE_FLAG	Out-of-State Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field identifies whether the member is domiciled within the state of Vermont. It is based on the PAT_ZIPCODE in the claims data set.</p>
DWMM843	MEDICARE_FLAG	Medicare Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field identifies Medicare products. It is based on the PRODUCT field, which is submitted by the payer.</p>
DWMM844	INTRAPAYER_DUPLICATE_FLAG	Intra-payer Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field de-duplicates membership rows within a payer. It is based on a unique combination of Member, MTIME, and PRODUCT to determine duplicate rows.</p>
DWMM845	INTERPAYER_DUPLICATE_FLAG	Inter-payer Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field de-duplicates membership rows across payers. It is based on a pre-set list of payer relationships, Member, and MTIME to determine duplicate rows.</p>
DWMM846	DATE_OF_DEATH	Member Date of Death	DATE	8	<p><b>Description:</b> This field identifies the member's date of death.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Member Date of Death element (ME401) reported by CMS in the mapped Medicare data.</p> <p><b>Notes:</b> This information pertains only to Medicare members.</p>

MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM847	MEDICARE_ADVANTAGE_CODE	Medicare Advantage Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates whether or not the member is a participant in a group health organization (GHO).</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Medicare Advantage Codes reference data set using the Medicare Advantage Code element (CODE; DWMCRAADV802).</p> <p><b>Notes:</b> An HMO (health maintenance organization) or a GHO (group health organization) is a type of MCO (managed care organization) that provides some form of healthcare coverage. The terms "HMO" and "GHO" are used interchangeably to indicate a managed care plan / Medicare Advantage.</p> <p>This information pertains only to Medicare members.</p>
DWMM848	MEDICARE_STATUS_CODE	Medicare Status Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's Medicare status with relationship to AGED, ESRD, and Disability.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Medicare Status Codes reference data set using the Medicare Status Code element (CODE; DWMCSTAT802).</p> <p><b>Notes:</b> This information pertains only to Medicare members.</p>
DWMM849	ENTITLEMENT_CODE	Monthly Entitlement Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code for each month of membership that indicates whether the member qualified for Medicare for a specific reported enrollment month as Aged, Disabled, ESRD (End Stage Renal Disease), or Disabled and ESRD.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Entitlement Codes reference data set using the Monthly Entitlement Code element (CODE; DWENTCODE802).</p> <p><b>Notes:</b> This information pertains only to Medicare members.</p>



MED_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMM850	ORIG_ENTITLEMENT_CODE	Original Entitlement Code	VARCHAR	2	<p><b>Description:</b> This field contains a code that indicates the reason for the beneficiary's original entitlement to Medicare benefits.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> When approved for release, this field links to the Entitlement Codes reference data set using the Monthly Entitlement Code element (CODE; DWENTCODE802).</p> <p><b>Notes:</b> This information pertains only to Medicare members.</p>
DWMM851	EXTERNAL_MEMBER_IDENTIFIER	External Member Identifier	VARCHAR	15	<p><b>Description:</b> This field contains an identifier assigned by Medicare.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare members.</p>

## Medicare Advantage Codes (Medicare)

The Medicare Advantage codes reference data set ([REF\\_MEDICARE\\_ADVANTAGE](#)) includes all valid Medicare Advantage code values and descriptions and links to the medical membership data.

REF_MEDICARE_ADVANTAGE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMCRAV801	ID	Medicare Advantage Code ID	NUMBER	10	<p><b>Description:</b> This field uniquely identifies a Medicare Advantage code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>
DWMCRAV802	CODE	Medicare Advantage Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates whether or not the member is a participant in a group health organization (GHO).</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the Medicare Advantage Code element (MEDICARE_ADVANTAGE_CODE) in the medical membership data.</p> <p><b>Notes:</b> An HMO (health maintenance organization) or a GHO (group health organization) is a type of MCO (managed care organization) that provides some form of healthcare coverage. The terms "HMO" and "GHO" are used interchangeably to indicate a managed care plan / Medicare Advantage.</p> <p>This information pertains only to Medicare data.</p>
DWMCRAV803	DESCRIPTION	Medicare Advantage Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Medicare Advantage Code element (CODE; DWMCRAV802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>

## Medicare Status Codes (Medicare)

The Medicare status codes reference data set ([REF\\_MEDICARE\\_STATUS](#)) includes all valid Medicare status code values and descriptions and links to the medical membership data.

REF_MEDICARE_STATUS					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMCRSTAT801	ID	Medicare Status Code ID	NUMBER	10	<p><b>Description:</b> This field uniquely identifies a Medicare status code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>
DWMCRSTAT802	CODE	Medicare Status Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's Medicare status in relationship to AGED, ESRD, and Disability.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the Medicare Status Code element (MEDICARE_STATUS_CODE) in the medical membership data.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>
DWMCRSTAT803	DESCRIPTION	Medicare Status Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Medicare Status Code element (CODE; DWMCRSTAT802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare data.</p>

## Member Detail

The detailed members data set ([MEMBER\\_DETAIL](#)) links to the medical claims, medical membership, pharmacy claims, and pharmacy membership data sets to supply the unique member number.

MEMBER_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMEM801	IDN	<b>Member Record ID Number</b>	NUMBER	15	<p><b>Description:</b> This field is the primary identification number for each member.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Member ID Number element (MEMBERIDN) in the claims and membership data.</p> <p><b>Notes:</b> This field should not be used to aggregate all records associated with a member; instead, use this data set's Member ID Number element (UNIQ_ID; DWMEM802).</p>
DWMEM802	UNIQ_ID	<b>Unique Member ID Number</b>	NUMBER	20	<p><b>Description:</b> This field contains the Unique Member ID code assigned by Onpoint CDM.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field can be used to aggregate all records associated with a member.</p>
DWMEM803	DOB	<b>Member Date of Birth</b>	DATE	8	<p><b>Description:</b> This field identifies the member's date of birth.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Member Date of Birth element (ME014) reported in the member eligibility data.</p>
DWMEM804	GENDER	<b>Member Gender</b>	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's gender.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Member Gender element (ME013) reported in the member eligibility data.</p> <p><b>Linkage:</b> This field links to the Gender Codes reference data set using the Member Gender Code element (CODE; DWGEN802).</p>

## MEMBER\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMEM805	ENCRYPT_ESSN	<b>Double-Encrypted Subscriber Social Security Number</b>	VARCHAR2	272	<p><b>Description:</b> This field contains a double-encrypted version of the subscriber's Social Security Number.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Encrypted Subscriber Unique Identification Number element reported by the payer in the member eligibility (ME008), medical claims (MC007), and pharmacy claims (PC007) data.</p> <p><b>Notes:</b> This field, encrypted during submission by the payer, has been encrypted again upon receipt by Onpoint CDM using the same algorithm across all payers. The U.S. Centers for Medicare &amp; Medicaid Services do not include the subscriber's SSN in the Medicare data supplied to Vermont in the MAPCP format.</p>
DWMEM806	ENCRYPT_MEMSSN	<b>Double-Encrypted Member Social Security Number</b>	VARCHAR2	272	<p><b>Description:</b> This field contains a double-encrypted version of the member's Social Security Number.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Member Identification Code element reported by the payer in the member eligibility (ME011), medical claims (MC010), and pharmacy claims (PC010) data.</p> <p><b>Notes:</b> This field, encrypted during submission by the payer, has been encrypted again upon receipt by Onpoint CDM using the same algorithm across all payers.</p>
DWMEM807	SUB_LNAME	<b>Subscriber's Last Name</b>	VARCHAR2	128	<p><b>Description:</b> This field contains an encrypted version of the subscriber's last name.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Encrypted Subscriber Last Name element reported by the payer in the member eligibility (ME101), medical claims (MC101), and pharmacy claims (PC101) data.</p> <p><b>Notes:</b> This field has been encrypted using the same algorithm across all payers. The U.S. Centers for Medicare &amp; Medicaid Services do not include the subscriber's SSN in the Medicare data supplied to Vermont in the MAPCP format.</p>
DWMEM808	SUB_FNAME	<b>Subscriber's First Name</b>	VARCHAR2	128	<p><b>Description:</b> This field contains an encrypted version of the subscriber's first name.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Encrypted Subscriber First Name element reported by the payer in the member eligibility (ME102), medical claims (MC102), and pharmacy claims (PC102) data.</p> <p><b>Notes:</b> This field has been encrypted using the same algorithm across all payers. The U.S. Centers for Medicare &amp; Medicaid Services do not include the subscriber's SSN in the Medicare data supplied to Vermont in the MAPCP format.</p>

## MEMBER\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMEM809	SUB_MNAME	Subscriber's Middle Initial	VARCHAR2	128	<p><b>Description:</b> This field contains an encrypted version of the subscriber's middle initial.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Encrypted Subscriber Middle Initial element reported by the payer in the member eligibility (ME103), medical claims (MC103), and pharmacy claims (PC103) data.</p> <p><b>Notes:</b> This field has been encrypted using the same algorithm across all payers. The U.S. Centers for Medicare &amp; Medicaid Services do not include the subscriber's SSN in the Medicare data supplied to Vermont in the MAPCP format.</p>
DWMEM810	MEM_LNAME	Member's Last Name	VARCHAR2	128	<p><b>Description:</b> This field contains an encrypted version of the member's last name.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Encrypted Member Last Name element reported by the payer in the member eligibility (ME104), medical claims (MC104), and pharmacy claims (PC104) data.</p> <p><b>Notes:</b> This field has been encrypted using the same algorithm across all payers.</p>
DWMEM811	MEM_FNAME	Member's First Name	VARCHAR2	128	<p><b>Description:</b> This field contains an encrypted version of the member's first name.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Encrypted Member First Name element reported by the payer in the member eligibility (ME105), medical claims (MC105), and pharmacy claims (PC105) data.</p> <p><b>Notes:</b> This field has been encrypted using the same algorithm across all payers.</p>
DWMEM812	MEM_MNAME	Member's Middle Initial	VARCHAR2	128	<p><b>Description:</b> This field contains an encrypted version of the member's middle initial.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Encrypted Member Middle Initial element reported by the payer in the member eligibility (ME106), medical claims (MC106), and pharmacy claims (PC106) data.</p> <p><b>Notes:</b> This field has been encrypted using the same algorithm across all payers.</p>

## MS-DRG Codes

The Medicare severity diagnosis-related group (MS-DRG) codes reference table includes all MS-DRG values assigned to identified inpatient hospital records and links to the medical claims data sets. This table is divided between commercial ([REF\\_CMSDRG\\_COMM](#)), Medicaid ([REF\\_CMSDRG\\_MEDI](#)), and Medicare ([REF\\_CMSDRG\\_MCARE](#)) APR-DRG codes.

**An important note of caution:** DRG versions change annually. Longitudinal comparisons based on DRG codes may reveal unexpected results and should be reviewed carefully. In particular, the DRG versions between FY2007 and FY2008 have significant changes.

REF_CMSDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC801	IPDISCHARGE	<b>Inpatient Discharge Identifier</b>	NUMBER	20	<b>Description:</b> This field links to the Inpatient Discharge Identifier element (IPDISCHARGE) in the medical claims data. This field is assigned as a value-added field to associate all claim lines for a given inpatient stay under one coded value.
DWMSDRGC802-1	USERKEY1	<b>User-Defined Key 1</b>	VARCHAR2	15	<b>Description:</b> This field contains a key used by the grouping software to identify the processing schedule. The software matches the user keys on the record to the user keys in schedules and compares the claim dates on the record with the schedule's effective date range when determining which schedule to use for processing. These values are used primarily for housekeeping, not analysis.
DWMSDRGC802-2	USERKEY2	<b>User-Defined Key 2</b>	VARCHAR2	15	<b>Description:</b> This field contains a key used by the grouping software to identify the processing schedule. The software matches the user keys on the record to the user keys in schedules and compares the claim dates on the record with the schedule's effective date range when determining which schedule to use for processing. These values are used primarily for housekeeping, not analysis.
DWMSDRGC803-1	CONDITION_CODE1	<b>Condition Code 1</b>	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-2	CONDITION_CODE2	<b>Condition Code 2</b>	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-3	CONDITION_CODE3	<b>Condition Code 3</b>	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-4	CONDITION_CODE4	<b>Condition Code 4</b>	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-5	CONDITION_CODE5	<b>Condition Code 5</b>	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.

## REF\_CMSDRG

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC803-6	CONDITION_CODE6	Condition Code 6	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-7	CONDITION_CODE7	Condition Code 7	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-8	CONDITION_CODE8	Condition Code 8	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-9	CONDITION_CODE9	Condition Code 9	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-10	CONDITION_CODE10	Condition Code 10	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC803-11	CONDITION_CODE11	Condition Code 11	VARCHAR2	2	<b>Description:</b> This field contains a code identifying conditions relating to the bill that may affect payer processing.
DWMSDRGC804	ICD_VERSION_QUAL	ICD Version Identifier	NUMBER	1	<b>Description:</b> This field identifies whether the code set used is ICD-9 or ICD-10. Valid codes are 9 (ICD-9) and 0 (ICD-10).
DWMSDRGC805	DMV_DAYS_AFTER_ADMIT	DMV Days After Admission	NUMBER	4	<b>Description:</b> This field identifies the number of days after admission on which the DMV (Days on Mechanical Ventilation) started.
DWMSDRGC806	LENGTH_OF_STAY	Length of Stay	NUMBER	4	<b>Description:</b> This field contains the length of stay (in days) for an inpatient claim. It is calculated by subtracting the Admission Date (ADMIT_DATE; MC018) from the Date of Service (Through) (LAST_SVC_DATE; MC060) as reported by the payer in the medical claims data. A one-day length of stay is reported if the patient was admitted and discharged on the same day or if the patient was admitted on one day and discharged on the following day. This field is populated on the first claim line. If a claim has multiple records, the length of stay will be 0 on all but the first record for that stay.
DWMSDRGC807	DISCHARGE_DAYS_AFTER_ADMIT	Discharge Days After Admission	NUMBER	3	<b>Description:</b> This field contains the number of days after admission on which the discharge occurred. This field is similar to length of stay (LENGTH_OF_STAY) except when the Admission Date (ADMIT_DATE; MC018) and the Date of Service (Through) (LAST_SVC_DATE; MC060) are the same; in such cases, while LENGTH_OF_STAY will be equal to 1, DISCHARGE_DAYS_AFTER_ADMIT will be 0. This field is used to determine the inclusion of certain secondary diagnoses into the calculation of admission MS-DRGs.
DWMSDRGC808	GROUPEL_TYPE_VERSION	Grouper Type & Version	NUMBER	5	<b>Description:</b> This field contains a code identifying the grouper type and version. The first two digits of this element identify the grouper type; the last three digits identify the grouper version.



## REF\_CMSDRG

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC809	DRG	<b>Diagnosis-Related Group Code</b>	NUMBER	3	<b>Description:</b> This field contains the CMS diagnosis-related group (DRG) code assigned to the inpatient stay. It is not reported by the carrier. This field is assigned by the claims records for the inpatient stay through the 3M™ DRG grouper software. In general, a DRG assigned using only claims data is a medical DRG because ICD-9 procedure codes are required for the assignment of a surgical code. The data in this field should be viewed with extreme caution.
DWMSDRGC810	MDC	<b>Major Diagnostic Category</b>	NUMBER	2	<b>Description:</b> This field contains the major diagnostic category (MDC) assigned at discharge and is calculated using the MS-DRG grouper version submitted.
DWMSDRGC812	RETURN_CODE_CLINICAL	<b>DRG Error Return Code</b>	NUMBER	2	<b>Description:</b> This field contains the error return code for the DRG assignment. The following should be noted: <ul style="list-style-type: none"> <li>• With APR processing, this field returns the error return code for the "Discharge" DRG assignment.</li> <li>• With CMS and TRICARE processing, this field returns the error return code for the "Final" DRG assignment.</li> <li>• For PPC processing, APR also must be licensed to receive data in this field.</li> <li>• Values 19–25 are only applicable with CMS, TRICARE, and PPC.</li> <li>• Values 22, 23, and 24 are no longer valid as of Version 28 (10/1/2010) of CMS, TRICARE, and PPC.</li> </ul>
DWMSDRGC811	SEVERITY_OF_ILLNESS	<b>Severity of Illness Index</b>	NUMBER	1	<b>Description:</b> This field contains a code identifying the severity of illness (SOI) subclass assigned at discharge. This field is the value determined by the MS-DRG process that signifies the additional severity level for the DRG value outside of the MS-DRG-assigned weight value. This field is assigned by the claims records for the inpatient stay through the 3M™ MS-DRG grouper software. In general, an MS-DRG assigned using only claims data may understate the severity due to underreporting of the ICD-9 procedure code.
DWMSDRGC813-1	DX_SOI_LEVEL1	<b>Diagnosis Severity Of Illness Level 1</b>	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-2	DX_SOI_LEVEL2	<b>Diagnosis Severity Of Illness Level 2</b>	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-3	DX_SOI_LEVEL3	<b>Diagnosis Severity Of Illness Level 3</b>	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-4	DX_SOI_LEVEL4	<b>Diagnosis Severity Of Illness Level 4</b>	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-5	DX_SOI_LEVEL5	<b>Diagnosis Severity Of Illness Level 5</b>	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC813-6	DX_SOI_LEVEL6	Diagnosis Severity Of Illness Level 6	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-7	DX_SOI_LEVEL7	Diagnosis Severity Of Illness Level 7	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-8	DX_SOI_LEVEL8	Diagnosis Severity Of Illness Level 8	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-9	DX_SOI_LEVEL9	Diagnosis Severity Of Illness Level 9	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-10	DX_SOI_LEVEL10	Diagnosis Severity Of Illness Level 10	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-11	DX_SOI_LEVEL11	Diagnosis Severity Of Illness Level 11	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-12	DX_SOI_LEVEL12	Diagnosis Severity Of Illness Level 12	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-13	DX_SOI_LEVEL13	Diagnosis Severity Of Illness Level 13	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-14	DX_SOI_LEVEL14	Diagnosis Severity Of Illness Level 14	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-15	DX_SOI_LEVEL15	Diagnosis Severity Of Illness Level 15	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-16	DX_SOI_LEVEL16	Diagnosis Severity Of Illness Level 16	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-17	DX_SOI_LEVEL17	Diagnosis Severity Of Illness Level 17	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-18	DX_SOI_LEVEL18	Diagnosis Severity Of Illness Level 18	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-19	DX_SOI_LEVEL19	Diagnosis Severity Of Illness Level 19	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-20	DX_SOI_LEVEL20	Diagnosis Severity Of Illness Level 20	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-21	DX_SOI_LEVEL21	Diagnosis Severity Of Illness Level 21	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC813-22	DX_SOI_LEVEL22	Diagnosis Severity Of Illness Level 22	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-23	DX_SOI_LEVEL23	Diagnosis Severity Of Illness Level 23	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-24	DX_SOI_LEVEL24	Diagnosis Severity Of Illness Level 24	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-25	DX_SOI_LEVEL25	Diagnosis Severity Of Illness Level 25	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-26	DX_SOI_LEVEL26	Diagnosis Severity Of Illness Level 26	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-27	DX_SOI_LEVEL27	Diagnosis Severity Of Illness Level 27	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-28	DX_SOI_LEVEL28	Diagnosis Severity Of Illness Level 28	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-29	DX_SOI_LEVEL29	Diagnosis Severity Of Illness Level 29	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-30	DX_SOI_LEVEL30	Diagnosis Severity Of Illness Level 30	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-31	DX_SOI_LEVEL31	Diagnosis Severity Of Illness Level 31	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-32	DX_SOI_LEVEL32	Diagnosis Severity Of Illness Level 32	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-33	DX_SOI_LEVEL33	Diagnosis Severity Of Illness Level 33	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-34	DX_SOI_LEVEL34	Diagnosis Severity Of Illness Level 34	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-35	DX_SOI_LEVEL35	Diagnosis Severity Of Illness Level 35	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-36	DX_SOI_LEVEL36	Diagnosis Severity Of Illness Level 36	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-37	DX_SOI_LEVEL37	Diagnosis Severity Of Illness Level 37	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC813-38	DX_SOI_LEVEL38	Diagnosis Severity Of Illness Level 38	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-39	DX_SOI_LEVEL39	Diagnosis Severity Of Illness Level 39	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-40	DX_SOI_LEVEL40	Diagnosis Severity Of Illness Level 40	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-41	DX_SOI_LEVEL41	Diagnosis Severity Of Illness Level 41	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-42	DX_SOI_LEVEL42	Diagnosis Severity Of Illness Level 42	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-43	DX_SOI_LEVEL43	Diagnosis Severity Of Illness Level 43	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-44	DX_SOI_LEVEL44	Diagnosis Severity Of Illness Level 44	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-45	DX_SOI_LEVEL45	Diagnosis Severity Of Illness Level 45	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-46	DX_SOI_LEVEL46	Diagnosis Severity Of Illness Level 46	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-47	DX_SOI_LEVEL47	Diagnosis Severity Of Illness Level 47	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-48	DX_SOI_LEVEL48	Diagnosis Severity Of Illness Level 48	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-49	DX_SOI_LEVEL49	Diagnosis Severity Of Illness Level 49	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC813-50	DX_SOI_LEVEL50	Diagnosis Severity Of Illness Level 50	VARCHAR2	1	<b>Description:</b> This field identifies the diagnosis severity of illness (SOI) subclass assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC814	RISK_OF_MORTALITY	Risk of Mortality	NUMBER	1	<b>Description:</b> This field contains the risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-1	DX_ROM_LEVEL1	Diagnosis Risk Of Mortality Level 1	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-2	DX_ROM_LEVEL2	Diagnosis Risk Of Mortality Level 2	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC815-3	DX_ROM_LEVEL3	<b>Diagnosis Risk Of Mortality Level 3</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-4	DX_ROM_LEVEL4	<b>Diagnosis Risk Of Mortality Level 4</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-5	DX_ROM_LEVEL5	<b>Diagnosis Risk Of Mortality Level 5</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-6	DX_ROM_LEVEL6	<b>Diagnosis Risk Of Mortality Level 6</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-7	DX_ROM_LEVEL7	<b>Diagnosis Risk Of Mortality Level 7</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-8	DX_ROM_LEVEL8	<b>Diagnosis Risk Of Mortality Level 8</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-9	DX_ROM_LEVEL9	<b>Diagnosis Risk Of Mortality Level 9</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-10	DX_ROM_LEVEL10	<b>Diagnosis Risk Of Mortality Level 10</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-11	DX_ROM_LEVEL11	<b>Diagnosis Risk Of Mortality Level 11</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-12	DX_ROM_LEVEL12	<b>Diagnosis Risk Of Mortality Level 12</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-13	DX_ROM_LEVEL13	<b>Diagnosis Risk Of Mortality Level 13</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-14	DX_ROM_LEVEL14	<b>Diagnosis Risk Of Mortality Level 14</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-15	DX_ROM_LEVEL15	<b>Diagnosis Risk Of Mortality Level 15</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-16	DX_ROM_LEVEL16	<b>Diagnosis Risk Of Mortality Level 16</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-17	DX_ROM_LEVEL17	<b>Diagnosis Risk Of Mortality Level 17</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-18	DX_ROM_LEVEL18	<b>Diagnosis Risk Of Mortality Level 18</b>	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC815-19	DX_ROM_LEVEL19	Diagnosis Risk Of Mortality Level 19	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-20	DX_ROM_LEVEL20	Diagnosis Risk Of Mortality Level 20	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-21	DX_ROM_LEVEL21	Diagnosis Risk Of Mortality Level 21	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-22	DX_ROM_LEVEL22	Diagnosis Risk Of Mortality Level 22	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-23	DX_ROM_LEVEL23	Diagnosis Risk Of Mortality Level 23	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-24	DX_ROM_LEVEL24	Diagnosis Risk Of Mortality Level 24	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-25	DX_ROM_LEVEL25	Diagnosis Risk Of Mortality Level 25	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-26	DX_ROM_LEVEL26	Diagnosis Risk Of Mortality Level 26	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-27	DX_ROM_LEVEL27	Diagnosis Risk Of Mortality Level 27	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-28	DX_ROM_LEVEL28	Diagnosis Risk Of Mortality Level 28	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-29	DX_ROM_LEVEL29	Diagnosis Risk Of Mortality Level 29	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-30	DX_ROM_LEVEL30	Diagnosis Risk Of Mortality Level 30	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-31	DX_ROM_LEVEL31	Diagnosis Risk Of Mortality Level 31	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-32	DX_ROM_LEVEL32	Diagnosis Risk Of Mortality Level 32	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-33	DX_ROM_LEVEL33	Diagnosis Risk Of Mortality Level 33	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-34	DX_ROM_LEVEL34	Diagnosis Risk Of Mortality Level 34	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC815-35	DX_ROM_LEVEL35	Diagnosis Risk Of Mortality Level 35	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-36	DX_ROM_LEVEL36	Diagnosis Risk Of Mortality Level 36	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-37	DX_ROM_LEVEL37	Diagnosis Risk Of Mortality Level 37	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-38	DX_ROM_LEVEL38	Diagnosis Risk Of Mortality Level 38	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-39	DX_ROM_LEVEL39	Diagnosis Risk Of Mortality Level 39	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-40	DX_ROM_LEVEL40	Diagnosis Risk Of Mortality Level 40	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-41	DX_ROM_LEVEL41	Diagnosis Risk Of Mortality Level 41	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-42	DX_ROM_LEVEL42	Diagnosis Risk Of Mortality Level 42	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-43	DX_ROM_LEVEL43	Diagnosis Risk Of Mortality Level 43	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-44	DX_ROM_LEVEL44	Diagnosis Risk Of Mortality Level 44	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-45	DX_ROM_LEVEL45	Diagnosis Risk Of Mortality Level 45	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-46	DX_ROM_LEVEL46	Diagnosis Risk Of Mortality Level 46	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-47	DX_ROM_LEVEL47	Diagnosis Risk Of Mortality Level 47	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-48	DX_ROM_LEVEL48	Diagnosis Risk Of Mortality Level 48	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-49	DX_ROM_LEVEL49	Diagnosis Risk Of Mortality Level 49	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC815-50	DX_ROM_LEVEL50	Diagnosis Risk Of Mortality Level 50	VARCHAR2	1	<b>Description:</b> This field contains the diagnosis risk of mortality (ROM) code assigned at discharge and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC816	PRINCIPAL_DX_EDITS_INPATIENT	<b>Principal Diagnosis Edits (Inpatient)</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit principal diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-1	SECONDARY_DX_EDITS_INPATIENT 1	<b>Secondary Diagnosis Edits (Inpatient) 1</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-2	SECONDARY_DX_EDITS_INPATIENT 2	<b>Secondary Diagnosis Edits (Inpatient) 2</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-3	SECONDARY_DX_EDITS_INPATIENT 3	<b>Secondary Diagnosis Edits (Inpatient) 3</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-4	SECONDARY_DX_EDITS_INPATIENT 4	<b>Secondary Diagnosis Edits (Inpatient) 4</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-5	SECONDARY_DX_EDITS_INPATIENT 5	<b>Secondary Diagnosis Edits (Inpatient) 5</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-6	SECONDARY_DX_EDITS_INPATIENT 6	<b>Secondary Diagnosis Edits (Inpatient) 6</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-7	SECONDARY_DX_EDITS_INPATIENT 7	<b>Secondary Diagnosis Edits (Inpatient) 7</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-8	SECONDARY_DX_EDITS_INPATIENT 8	<b>Secondary Diagnosis Edits (Inpatient) 8</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-9	SECONDARY_DX_EDITS_INPATIENT 9	<b>Secondary Diagnosis Edits (Inpatient) 9</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-10	SECONDARY_DX_EDITS_INPATIENT 10	<b>Secondary Diagnosis Edits (Inpatient) 10</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-11	SECONDARY_DX_EDITS_INPATIENT 11	<b>Secondary Diagnosis Edits (Inpatient) 11</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC817-12	SECONDARY_DX_EDITS_INPATIENT 12	Secondary Diagnosis Edits (Inpatient) 12	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-13	SECONDARY_DX_EDITS_INPATIENT 13	Secondary Diagnosis Edits (Inpatient) 13	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-14	SECONDARY_DX_EDITS_INPATIENT 14	Secondary Diagnosis Edits (Inpatient) 14	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-15	SECONDARY_DX_EDITS_INPATIENT 15	Secondary Diagnosis Edits (Inpatient) 15	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-16	SECONDARY_DX_EDITS_INPATIENT 16	Secondary Diagnosis Edits (Inpatient) 16	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-17	SECONDARY_DX_EDITS_INPATIENT 17	Secondary Diagnosis Edits (Inpatient) 17	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-18	SECONDARY_DX_EDITS_INPATIENT 18	Secondary Diagnosis Edits (Inpatient) 18	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-19	SECONDARY_DX_EDITS_INPATIENT 19	Secondary Diagnosis Edits (Inpatient) 19	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-20	SECONDARY_DX_EDITS_INPATIENT 20	Secondary Diagnosis Edits (Inpatient) 20	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-21	SECONDARY_DX_EDITS_INPATIENT 21	Secondary Diagnosis Edits (Inpatient) 21	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-22	SECONDARY_DX_EDITS_INPATIENT 22	Secondary Diagnosis Edits (Inpatient) 22	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC817-23	SECONDARY_DX_EDITS_INPATIENT 23	Secondary Diagnosis Edits (Inpatient) 23	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-24	SECONDARY_DX_EDITS_INPATIENT 24	Secondary Diagnosis Edits (Inpatient) 24	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-25	SECONDARY_DX_EDITS_INPATIENT 25	Secondary Diagnosis Edits (Inpatient) 25	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-26	SECONDARY_DX_EDITS_INPATIENT 26	Secondary Diagnosis Edits (Inpatient) 26	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-27	SECONDARY_DX_EDITS_INPATIENT 27	Secondary Diagnosis Edits (Inpatient) 27	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-28	SECONDARY_DX_EDITS_INPATIENT 28	Secondary Diagnosis Edits (Inpatient) 28	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-29	SECONDARY_DX_EDITS_INPATIENT 29	Secondary Diagnosis Edits (Inpatient) 29	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-30	SECONDARY_DX_EDITS_INPATIENT 30	Secondary Diagnosis Edits (Inpatient) 30	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-31	SECONDARY_DX_EDITS_INPATIENT 31	Secondary Diagnosis Edits (Inpatient) 31	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-32	SECONDARY_DX_EDITS_INPATIENT 32	Secondary Diagnosis Edits (Inpatient) 32	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-33	SECONDARY_DX_EDITS_INPATIENT 33	Secondary Diagnosis Edits (Inpatient) 33	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC817-34	SECONDARY_DX_EDITS_INPATIENT 34	Secondary Diagnosis Edits (Inpatient) 34	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-35	SECONDARY_DX_EDITS_INPATIENT 35	Secondary Diagnosis Edits (Inpatient) 35	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-36	SECONDARY_DX_EDITS_INPATIENT 36	Secondary Diagnosis Edits (Inpatient) 36	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-37	SECONDARY_DX_EDITS_INPATIENT 37	Secondary Diagnosis Edits (Inpatient) 37	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-38	SECONDARY_DX_EDITS_INPATIENT 38	Secondary Diagnosis Edits (Inpatient) 38	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-39	SECONDARY_DX_EDITS_INPATIENT 39	Secondary Diagnosis Edits (Inpatient) 39	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-40	SECONDARY_DX_EDITS_INPATIENT 40	Secondary Diagnosis Edits (Inpatient) 40	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-41	SECONDARY_DX_EDITS_INPATIENT 41	Secondary Diagnosis Edits (Inpatient) 41	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-42	SECONDARY_DX_EDITS_INPATIENT 42	Secondary Diagnosis Edits (Inpatient) 42	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-43	SECONDARY_DX_EDITS_INPATIENT 43	Secondary Diagnosis Edits (Inpatient) 43	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-44	SECONDARY_DX_EDITS_INPATIENT 44	Secondary Diagnosis Edits (Inpatient) 44	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC817-45	SECONDARY_DX_EDITS_INPATIENT 45	<b>Secondary Diagnosis Edits (Inpatient) 45</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-46	SECONDARY_DX_EDITS_INPATIENT 46	<b>Secondary Diagnosis Edits (Inpatient) 46</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-47	SECONDARY_DX_EDITS_INPATIENT 47	<b>Secondary Diagnosis Edits (Inpatient) 47</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-48	SECONDARY_DX_EDITS_INPATIENT 48	<b>Secondary Diagnosis Edits (Inpatient) 48</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC817-49	SECONDARY_DX_EDITS_INPATIENT 49	<b>Secondary Diagnosis Edits (Inpatient) 49</b>	NUMBER	10	<b>Description:</b> This field identifies a maximum of five two-digit secondary diagnosis edits/flags, including Medicare Code Editor (MCE) edits.
DWMSDRGC818-1	PROCEDURE_EDIT S1	<b>Procedure Edits 1</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-2	PROCEDURE_EDIT S2	<b>Procedure Edits 2</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-3	PROCEDURE_EDIT S3	<b>Procedure Edits 3</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-4	PROCEDURE_EDIT S4	<b>Procedure Edits 4</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-5	PROCEDURE_EDIT S5	<b>Procedure Edits 5</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-6	PROCEDURE_EDIT S6	<b>Procedure Edits 6</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-7	PROCEDURE_EDIT S7	<b>Procedure Edits 7</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-8	PROCEDURE_EDIT S8	<b>Procedure Edits 8</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-9	PROCEDURE_EDIT S9	<b>Procedure Edits 9</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC818-10	PROCEDURE_EDIT S10	<b>Procedure Edits 10</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-11	PROCEDURE_EDIT S11	<b>Procedure Edits 11</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-12	PROCEDURE_EDIT S12	<b>Procedure Edits 12</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-13	PROCEDURE_EDIT S13	<b>Procedure Edits 13</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-14	PROCEDURE_EDIT S14	<b>Procedure Edits 14</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-15	PROCEDURE_EDIT S15	<b>Procedure Edits 15</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-16	PROCEDURE_EDIT S16	<b>Procedure Edits 16</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-17	PROCEDURE_EDIT S17	<b>Procedure Edits 17</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-18	PROCEDURE_EDIT S18	<b>Procedure Edits 18</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-19	PROCEDURE_EDIT S19	<b>Procedure Edits 19</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-20	PROCEDURE_EDIT S20	<b>Procedure Edits 20</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-21	PROCEDURE_EDIT S21	<b>Procedure Edits 21</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-22	PROCEDURE_EDIT S22	<b>Procedure Edits 22</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-23	PROCEDURE_EDIT S23	<b>Procedure Edits 23</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-24	PROCEDURE_EDIT S24	<b>Procedure Edits 24</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-25	PROCEDURE_EDIT S25	<b>Procedure Edits 25</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC818-26	PROCEDURE_EDIT S26	<b>Procedure Edits 26</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-27	PROCEDURE_EDIT S27	<b>Procedure Edits 27</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-28	PROCEDURE_EDIT S28	<b>Procedure Edits 28</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-29	PROCEDURE_EDIT S29	<b>Procedure Edits 29</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-30	PROCEDURE_EDIT S30	<b>Procedure Edits 30</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-31	PROCEDURE_EDIT S31	<b>Procedure Edits 31</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-32	PROCEDURE_EDIT S32	<b>Procedure Edits 32</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-33	PROCEDURE_EDIT S33	<b>Procedure Edits 33</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-34	PROCEDURE_EDIT S34	<b>Procedure Edits 34</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-35	PROCEDURE_EDIT S35	<b>Procedure Edits 35</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-36	PROCEDURE_EDIT S36	<b>Procedure Edits 36</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-37	PROCEDURE_EDIT S37	<b>Procedure Edits 37</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-38	PROCEDURE_EDIT S38	<b>Procedure Edits 38</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-39	PROCEDURE_EDIT S39	<b>Procedure Edits 39</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-40	PROCEDURE_EDIT S40	<b>Procedure Edits 40</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-41	PROCEDURE_EDIT S41	<b>Procedure Edits 41</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC818-42	PROCEDURE_EDIT S42	<b>Procedure Edits 42</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-43	PROCEDURE_EDIT S43	<b>Procedure Edits 43</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-44	PROCEDURE_EDIT S44	<b>Procedure Edits 44</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-45	PROCEDURE_EDIT S45	<b>Procedure Edits 45</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-46	PROCEDURE_EDIT S46	<b>Procedure Edits 46</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-47	PROCEDURE_EDIT S47	<b>Procedure Edits 47</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-48	PROCEDURE_EDIT S48	<b>Procedure Edits 48</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-49	PROCEDURE_EDIT S49	<b>Procedure Edits 49</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-50	PROCEDURE_EDIT S50	<b>Procedure Edits 50</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC818-51	PROCEDURE_EDIT S51	<b>Procedure Edits 51</b>	NUMBER	10	<b>Description:</b> This field contains a maximum of five two-digit codes specifying the edits that applied to the procedure.
DWMSDRGC819	MAPPING_INDICATOR	<b>Mapping Indicator</b>	NUMBER	1	<b>Description:</b> This field contains a code indicating whether or not mapping was called and if it occurred.
DWMSDRGC820	MAPPING_DATE	<b>Mapping Date</b>	DATE	8	<b>Description:</b> This field contains the effective ICD-9-CM date used for mapping.
DWMSDRGC821	MAPPING_TYPE	<b>Mapping Type</b>	NUMBER	1	<b>Description:</b> This field contains a code indicating what type of mapping was used. Types of mapping include: <ul style="list-style-type: none"> <li>• Historical — Maps a new ICD-9-CM code to an existing ICD-9-CM code that would cause the patient to be assigned to the same DRG as they would have if there had been no change in ICD-9-CM.</li> <li>• Logical — Maps a new ICD-9-CM code to the DRG that is clinically most appropriate</li> </ul>
DWMSDRGC822	WEIGHT	<b>DRG Relative Weight</b>	NUMBER	9	<b>Description:</b> This field indicates the relative weight for the DRG.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC823	MEDICAL_SURGICAL_FLAG	Medical Surgical Flag	NUMBER	1	<b>Description:</b> This field contains the Medical Surgical Flag assigned at discharge and is calculated using the grouper version submitted.
DWMSDRGC824	ADMIT_DX_EDITS_INPATIENT	Admit Diagnosis Edits (Inpatient)	NUMBER	2	<b>Description:</b> This field returns a blank when there are no edits or if the admitting diagnosis code field is left blank on input.
DWMSDRGC825-1	DX_AFFECT_DRG_FLAG1	Diagnosis-Affected DRG Flag 1	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-2	DX_AFFECT_DRG_FLAG2	Diagnosis-Affected DRG Flag 2	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-3	DX_AFFECT_DRG_FLAG3	Diagnosis-Affected DRG Flag 3	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-4	DX_AFFECT_DRG_FLAG4	Diagnosis-Affected DRG Flag 4	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-5	DX_AFFECT_DRG_FLAG5	Diagnosis-Affected DRG Flag 5	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-6	DX_AFFECT_DRG_FLAG6	Diagnosis-Affected DRG Flag 6	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-7	DX_AFFECT_DRG_FLAG7	Diagnosis-Affected DRG Flag 7	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-8	DX_AFFECT_DRG_FLAG8	Diagnosis-Affected DRG Flag 8	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-9	DX_AFFECT_DRG_FLAG9	Diagnosis-Affected DRG Flag 9	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-10	DX_AFFECT_DRG_FLAG10	Diagnosis-Affected DRG Flag 10	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-11	DX_AFFECT_DRG_FLAG11	Diagnosis-Affected DRG Flag 11	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-12	DX_AFFECT_DRG_FLAG12	Diagnosis-Affected DRG Flag 12	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-13	DX_AFFECT_DRG_FLAG13	Diagnosis-Affected DRG Flag 13	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-14	DX_AFFECT_DRG_FLAG14	Diagnosis-Affected DRG Flag 14	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.



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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC825-15	DX_AFFECT_DRG_FLAG15	Diagnosis-Affected DRG Flag 15	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-16	DX_AFFECT_DRG_FLAG16	Diagnosis-Affected DRG Flag 16	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-17	DX_AFFECT_DRG_FLAG17	Diagnosis-Affected DRG Flag 17	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-18	DX_AFFECT_DRG_FLAG18	Diagnosis-Affected DRG Flag 18	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-19	DX_AFFECT_DRG_FLAG19	Diagnosis-Affected DRG Flag 19	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-20	DX_AFFECT_DRG_FLAG20	Diagnosis-Affected DRG Flag 20	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-21	DX_AFFECT_DRG_FLAG21	Diagnosis-Affected DRG Flag 21	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-22	DX_AFFECT_DRG_FLAG22	Diagnosis-Affected DRG Flag 22	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-23	DX_AFFECT_DRG_FLAG23	Diagnosis-Affected DRG Flag 23	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-24	DX_AFFECT_DRG_FLAG24	Diagnosis-Affected DRG Flag 24	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-25	DX_AFFECT_DRG_FLAG25	Diagnosis-Affected DRG Flag 25	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-26	DX_AFFECT_DRG_FLAG26	Diagnosis-Affected DRG Flag 26	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-27	DX_AFFECT_DRG_FLAG27	Diagnosis-Affected DRG Flag 27	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-28	DX_AFFECT_DRG_FLAG28	Diagnosis-Affected DRG Flag 28	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-29	DX_AFFECT_DRG_FLAG29	Diagnosis-Affected DRG Flag 29	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-30	DX_AFFECT_DRG_FLAG30	Diagnosis-Affected DRG Flag 30	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC825-31	DX_AFFECT_DRG_FLAG31	Diagnosis-Affected DRG Flag 31	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-32	DX_AFFECT_DRG_FLAG32	Diagnosis-Affected DRG Flag 32	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-33	DX_AFFECT_DRG_FLAG33	Diagnosis-Affected DRG Flag 33	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-34	DX_AFFECT_DRG_FLAG34	Diagnosis-Affected DRG Flag 34	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-35	DX_AFFECT_DRG_FLAG35	Diagnosis-Affected DRG Flag 35	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-36	DX_AFFECT_DRG_FLAG36	Diagnosis-Affected DRG Flag 36	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-37	DX_AFFECT_DRG_FLAG37	Diagnosis-Affected DRG Flag 37	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-38	DX_AFFECT_DRG_FLAG38	Diagnosis-Affected DRG Flag 38	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-39	DX_AFFECT_DRG_FLAG39	Diagnosis-Affected DRG Flag 39	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-40	DX_AFFECT_DRG_FLAG40	Diagnosis-Affected DRG Flag 40	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-41	DX_AFFECT_DRG_FLAG41	Diagnosis-Affected DRG Flag 41	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-42	DX_AFFECT_DRG_FLAG42	Diagnosis-Affected DRG Flag 42	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-43	DX_AFFECT_DRG_FLAG43	Diagnosis-Affected DRG Flag 43	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-44	DX_AFFECT_DRG_FLAG44	Diagnosis-Affected DRG Flag 44	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-45	DX_AFFECT_DRG_FLAG45	Diagnosis-Affected DRG Flag 45	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-46	DX_AFFECT_DRG_FLAG46	Diagnosis-Affected DRG Flag 46	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.

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Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC825-47	DX_AFFECT_DRG_FLAG47	<b>Diagnosis-Affected DRG Flag 47</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-48	DX_AFFECT_DRG_FLAG48	<b>Diagnosis-Affected DRG Flag 48</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-49	DX_AFFECT_DRG_FLAG49	<b>Diagnosis-Affected DRG Flag 49</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC825-50	DX_AFFECT_DRG_FLAG50	<b>Diagnosis-Affected DRG Flag 50</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the diagnosis affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-1	PROCEDURE_AFFECT_DRG_FLAG1	<b>Procedure-Affected DRG Flag 1</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-2	PROCEDURE_AFFECT_DRG_FLAG2	<b>Procedure-Affected DRG Flag 2</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-3	PROCEDURE_AFFECT_DRG_FLAG3	<b>Procedure-Affected DRG Flag 3</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-4	PROCEDURE_AFFECT_DRG_FLAG4	<b>Procedure-Affected DRG Flag 4</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-5	PROCEDURE_AFFECT_DRG_FLAG5	<b>Procedure-Affected DRG Flag 5</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-6	PROCEDURE_AFFECT_DRG_FLAG6	<b>Procedure-Affected DRG Flag 6</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-7	PROCEDURE_AFFECT_DRG_FLAG7	<b>Procedure-Affected DRG Flag 7</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-8	PROCEDURE_AFFECT_DRG_FLAG8	<b>Procedure-Affected DRG Flag 8</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-9	PROCEDURE_AFFECT_DRG_FLAG9	<b>Procedure-Affected DRG Flag 9</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-10	PROCEDURE_AFFECT_DRG_FLAG10	<b>Procedure-Affected DRG Flag 10</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-11	PROCEDURE_AFFECT_DRG_FLAG11	<b>Procedure-Affected DRG Flag 11</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-12	PROCEDURE_AFFECT_DRG_FLAG12	<b>Procedure-Affected DRG Flag 12</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.

## REF\_CMSDRG

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC826-13	PROCEDURE_AFFECT_DRG_FLAG13	<b>Procedure-Affected DRG Flag 13</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-14	PROCEDURE_AFFECT_DRG_FLAG14	<b>Procedure-Affected DRG Flag 14</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-15	PROCEDURE_AFFECT_DRG_FLAG15	<b>Procedure-Affected DRG Flag 15</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-16	PROCEDURE_AFFECT_DRG_FLAG16	<b>Procedure-Affected DRG Flag 16</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-17	PROCEDURE_AFFECT_DRG_FLAG17	<b>Procedure-Affected DRG Flag 17</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-18	PROCEDURE_AFFECT_DRG_FLAG18	<b>Procedure-Affected DRG Flag 18</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-19	PROCEDURE_AFFECT_DRG_FLAG19	<b>Procedure-Affected DRG Flag 19</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-20	PROCEDURE_AFFECT_DRG_FLAG20	<b>Procedure-Affected DRG Flag 20</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-21	PROCEDURE_AFFECT_DRG_FLAG21	<b>Procedure-Affected DRG Flag 21</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-22	PROCEDURE_AFFECT_DRG_FLAG22	<b>Procedure-Affected DRG Flag 22</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-23	PROCEDURE_AFFECT_DRG_FLAG23	<b>Procedure-Affected DRG Flag 23</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-24	PROCEDURE_AFFECT_DRG_FLAG24	<b>Procedure-Affected DRG Flag 24</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-25	PROCEDURE_AFFECT_DRG_FLAG25	<b>Procedure-Affected DRG Flag 25</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-26	PROCEDURE_AFFECT_DRG_FLAG26	<b>Procedure-Affected DRG Flag 26</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-27	PROCEDURE_AFFECT_DRG_FLAG27	<b>Procedure-Affected DRG Flag 27</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-28	PROCEDURE_AFFECT_DRG_FLAG28	<b>Procedure-Affected DRG Flag 28</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.

## REF\_CMSDRG

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC826-29	PROCEDURE_AFFECT_DRG_FLAG29	<b>Procedure-Affected DRG Flag 29</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-30	PROCEDURE_AFFECT_DRG_FLAG30	<b>Procedure-Affected DRG Flag 30</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-31	PROCEDURE_AFFECT_DRG_FLAG31	<b>Procedure-Affected DRG Flag 31</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-32	PROCEDURE_AFFECT_DRG_FLAG32	<b>Procedure-Affected DRG Flag 32</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-33	PROCEDURE_AFFECT_DRG_FLAG33	<b>Procedure-Affected DRG Flag 33</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-34	PROCEDURE_AFFECT_DRG_FLAG34	<b>Procedure-Affected DRG Flag 34</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-35	PROCEDURE_AFFECT_DRG_FLAG35	<b>Procedure-Affected DRG Flag 35</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-36	PROCEDURE_AFFECT_DRG_FLAG36	<b>Procedure-Affected DRG Flag 36</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-37	PROCEDURE_AFFECT_DRG_FLAG37	<b>Procedure-Affected DRG Flag 37</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-38	PROCEDURE_AFFECT_DRG_FLAG38	<b>Procedure-Affected DRG Flag 38</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-39	PROCEDURE_AFFECT_DRG_FLAG39	<b>Procedure-Affected DRG Flag 39</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-40	PROCEDURE_AFFECT_DRG_FLAG40	<b>Procedure-Affected DRG Flag 40</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-41	PROCEDURE_AFFECT_DRG_FLAG41	<b>Procedure-Affected DRG Flag 41</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-42	PROCEDURE_AFFECT_DRG_FLAG42	<b>Procedure-Affected DRG Flag 42</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-43	PROCEDURE_AFFECT_DRG_FLAG43	<b>Procedure-Affected DRG Flag 43</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-44	PROCEDURE_AFFECT_DRG_FLAG44	<b>Procedure-Affected DRG Flag 44</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.

REF_CMSDRG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGC826-45	PROCEDURE_AFFECT_DRG_FLAG45	<b>Procedure-Affected DRG Flag 45</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-46	PROCEDURE_AFFECT_DRG_FLAG46	<b>Procedure-Affected DRG Flag 46</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-47	PROCEDURE_AFFECT_DRG_FLAG47	<b>Procedure-Affected DRG Flag 47</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-48	PROCEDURE_AFFECT_DRG_FLAG48	<b>Procedure-Affected DRG Flag 48</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-49	PROCEDURE_AFFECT_DRG_FLAG49	<b>Procedure-Affected DRG Flag 49</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-50	PROCEDURE_AFFECT_DRG_FLAG50	<b>Procedure-Affected DRG Flag 50</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC826-51	PROCEDURE_AFFECT_DRG_FLAG51	<b>Procedure-Affected DRG Flag 51</b>	NUMBER	1	<b>Description:</b> This field contains a flag identifying how the procedure affected the DRG assignment and is calculated using the grouper version submitted.
DWMSDRGC827	CMSDRG_LABEL_IDN	<b>MS-DRG Label ID Number</b>	NUMBER	22	<b>Description:</b> The field contains the MS-DRG Label ID Number, which links to the REF_CMSDRG_LABEL data set's ID Number element (IDN).

## MS-DRG Labels

The MS-DRG labels reference data set ([REF\\_CMSDRG\\_LABEL](#)) includes the Medicare severity diagnosis-related group (DRG) label descriptions as defined by 3M™ grouping software and links to the MS-DRG codes reference data set.

**An important note of caution:** DRG versions change annually. Longitudinal comparisons based on DRG codes may reveal unexpected results and should be reviewed carefully. In particular, the DRG versions between FY2007 and FY2008 have significant changes.

REF_CMSDRG_LABEL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWMSDRGL801	IDN	ID Number	NUMBER	22	<b>Description:</b> This field contains a unique ID number identifying the record and links to the MS-DRG Label ID Number element (CMSDRG_LABEL_IDN) in the REF_CMSDRG data set.
DWMSDRGL802	DRG	MS-DRG Code	NUMBER	3	<b>Description:</b> This field contains the diagnosis-related group (DRG) assigned to the inpatient stay based on the appropriate MS-DRG weight file. It is not reported by the carrier. This field is assigned by the claims records for the inpatient stay through the 3M™ MS-DRG grouper software. In general, an MS-DRG assigned using only claims data is a medical MS-DRG because ICD-9 procedure codes are required for the assignment of a surgical code. The data in this field should be viewed with extreme caution.
DWMSDRGL802A	WT	Weight	NUMBER	10,4	<b>Description:</b> This field contains the weight for the diagnosis-related group (DRG) assigned to the inpatient stay. It can be used to compare DRG's across years.
DWMSDRGL803	DESCRIPTION	MS-DRG Code Description	VARCHAR2	500	<b>Description:</b> This field contains the description of the MS-DRG Code element (DRG) as supplied by the 3M™ MS-DRG Software.
DWMSDRGL803A	MDC	Major Diagnostic Category	Number	3	<b>Description:</b> This field contains the major diagnostic category related to the diagnosis-related grouper (DRG) assigned to the inpatient stay.
DWMSDRGL804	BEGIN_DISCH_DATE	Begin Discharge Date Range	DATE	8	<b>Description:</b> This field contains the beginning date of the time period for which the specific MS-DRG weight table is defined.
DWMSDRGL805	END_DISCH_DATE	End Discharge Date Range	DATE	8	<b>Description:</b> This field contains the ending date of the time period for which the specific MS-DRG weight table is defined.
DWMSDRGL806	GROUPEX_DESCRIPTION	MS-DRG Grouper Description	VARCHAR2	8	<b>Description:</b> This field contains the specific grouper description that identifies the MS-DRG weight table used to generate the MS-DRG value and associated IDN value (IDN) for the inpatient hospital stay identified in the REF_CMSDRG data set.
DWMSDRGL807	GROUPEX_VERSION	MS-DRG Grouper Version	VARCHAR2	2	<b>Description:</b> This field contains the last 2 characters of the MS-DRG Grouper Description field.



## Non-Payment Reason Codes (Medicare)

The Medicare non-payment reason codes reference data set ([REF\\_NON\\_PMT\\_REASON](#)) includes all valid Medicare non-payment reason code values and descriptions and links to the medical claims data.

REF_NON_PMT_REASON					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWNPRC801	ID	Non-Payment Reason Code ID	NUMBER	10	<p><b>Description:</b> This field uniquely identifies a Medicare non-payment reason code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field will link to a corollary ID element in the relevant core table(s) when it becomes available in approved extracts.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWNPRC802	CODE	Non-Payment Reason Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the reason that no Medicare payment was made for services on an institutional claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to the Medicare Non-Payment Reason Code element (NON_PMT_REASON_CODE; MC445) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWNPRC803	DESCRIPTION	Non-Payment Reason Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains a description of the Non-Payment Reason Code (CODE; DWNPR802).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>



## Payers

The payers reference data set ([REF\\_PAYER](#)) includes all payer demographic information and links to data sets that contain a [PAYERID](#) field.

REF_PAYER					
REFERENCE ID	WAREHOUSE NAME	COMMON NAME	TYPE	MAX. LENGTH	DESCRIPTION
DWPAY801	ID	<b>Payer Record ID Number</b>	NUMBER	8	<p><b>Description:</b> This field is the primary identification number for each payer record and links to data sets' Payer ID Number (PAYERID) fields.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>
DWPAY802	PAYERCODE	<b>Payer Code</b>	VARCHAR2	8	<p><b>Description:</b> This field contains the data reporter code for the payer or data reporter submitting payments.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its sources are the Payer elements reported in the member eligibility (ME001), medical claims (MC001), and pharmacy claims (PC001) data.</p> <p><b>Notes:</b> The first two characters indicate the data collection state and the third character indicates the type of data reporter. In Vermont, valid codes include:</p> <p style="padding-left: 40px;">VTC ..... Commercial data reporter  VTG ..... Governmental payer  VTT ..... Third-party administrator</p> <p>A single payer may have multiple data reporter codes because the payer is submitting from more than one system or from more than one location. All data reporter codes associated with a single payer will have the same first seven characters. A suffix in the eighth position may be used to distinguish the location and/or system variations.</p> <p>Note that due to administrative relationships between payers, it is possible that one or more payers are responsible for submitting membership data that apply to a single submission of medical claims. The use of Payer Code alone may not be sufficient to identify all claims and membership data associated with that payer. This field is used primarily for tracking compliance by payer or data reporter.</p>
DWPAY803	COMPANY	<b>Company</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the company name of the payer or data reporter.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field's source is the payer registration process.</p>

REF_PAYER					
REFERENCE ID	WAREHOUSE NAME	COMMON NAME	TYPE	MAX. LENGTH	DESCRIPTION
DWPAY804	ADDRESS	Company Address	VARCHAR2	255	<p><b>Description:</b> This field contains the street address of the payer's or data reporter's company.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field's source is the payer registration process.</p>
DWPAY805	CITY	Company City	VARCHAR2	100	<p><b>Description:</b> This field contains the city name of the payer's or data reporter's company address.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field's source is the payer registration process.</p>
DWPAY806	STATE	Company State	VARCHAR2	2	<p><b>Description:</b> This field identifies the state name of the payer's or data reporter's company address.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field's source is the payer registration process. This field uses the two-character state abbreviation defined by the U.S. Postal Service.</p>
DWPAY807	ZIPCODE	Company ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field contains the ZIP code of the payer's or data reporter's company address.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to the Geography reference data set using the ZIP Code element (CODE; DWGEO802).</p> <p><b>Notes:</b> This field's source is the payer registration process.</p>
DWPAY808	ZIPCODEID	Company ZIP Code ID	NUMBER	20	<p><b>Description:</b> This field contains the ID number for Company ZIP Code element (ZIPCODE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Geography reference data set using the Geographic Record ID element (ID; DWGEO801).</p> <p><b>Notes:</b> While the required format is numeric, this field is stored in the warehouse as text to preserve any leading zeroes. The ZIPCODEID field was created for efficient processing of large data sets. Use this field when summarizing data by geographic area.</p>

REF_PAYER					
REFERENCE ID	WAREHOUSE NAME	COMMON NAME	TYPE	MAX. LENGTH	DESCRIPTION
DWPAY809	FILETYPES	<b>File Types</b>	VARCHAR2	11	<p><b>Description:</b> This field contains the type(s) of data submitted by the payer.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field's source is the payer registration process. Valid codes include:</p> <p style="margin-left: 40px;">E ..... Membership (Eligibility/Enrollment)  M ..... Medical  P ..... Pharmacy</p> <p>Note that when a payer submits more than one type, the types are concatenated (e.g., "EMP" means the carrier submits all three file types).</p>

## Pharmacy Claims

The pharmacy claims data set contains one record for each filled script. All adjustments to the claims have been applied to the data. This table is divided between commercial ([RX\\_DETAIL](#)), Medicaid ([RX\\_DETAIL\\_MEDICAID](#)), and Medicare ([RX\\_DETAIL\\_MEDICARE](#)) claims. (**Note:** Newly added fields pertaining only to Medicare data have been highlighted at the end of this core table in [orange](#).) When the [RX\\_DETAIL](#) data set is released and organized by service year, the data sets will be appended with a [\\_CCYY](#) suffix to reflect the year of service.

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC801	IDN	Pharmacy Claim IDN Assigned by System	NUMBER	20	<p><b>Description:</b> This field contains the primary ID number for each pharmacy claims record and uniquely identifies the record within the data warehouse.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>
PC802	PAYERID	Payer ID Number	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (PC001) reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>
PC002	AFF_PAYER	Affiliated Payer	VARCHAR2	30	<p><b>Description:</b> When populated, this field contains the payer code (assigned by Onpoint and distributed to submitters) for the reporter's parent company.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field does not contain the National Plan ID (NPI).</p>
PC803	PRODUCT	Product Code (Standardized)	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies the member's type of insurance or insurance product.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint to standardize the reporting of product codes across submitted file types. Its source is the Insurance Type / Product Code element (PC003) reported by the payer in the pharmacy claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Product Codes reference data set using the Product Code element (CODE; DWPROD802).</p>

## RX\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC804	ENCRYPT_CLAIM	Encrypted Payer Claim Control Number	VARCHAR2	128	<p><b>Description:</b> This field contains an encryption of the claim number used by the payer to internally track the claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer Claim Control Number element (PC004) reported by the payer.</p> <p><b>Notes:</b> In general, the claim number is associated with all service lines of the bill. Multiple medical records therefore may share the same claim number. This number must apply to the entire claim and be unique within the payer's system. Note that this field has been encrypted upon receipt by Onpoint CDM using the same algorithm across all payers.</p>
PC005	LINE	Line Counter	NUMBER	4	<p><b>Description:</b> This field contains the line number for this service as reported by the payer.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> The Line Counter begins with 1 and is incremented by 1 for each additional service line of a claim.</p>
PC006	INS_GROUP	Insured Group or Policy Number	VARCHAR2	50	<p><b>Description:</b> This field contains the insured group or policy number associated with the entity that has purchased the insurance.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> For self-insured individuals, this relates to the purchaser. For the majority of eligibility and claims data, the group relates to the employer. The group number does not uniquely identify the subscriber.</p>
PC805	ENCRYPT_CONTRACT	Double-Encrypted Plan-Specific Contract Number	VARCHAR2	272	<p><b>Description:</b> This field contains a double-encrypted version of the payer-assigned contract number for the subscriber.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. This field's source is the encrypted Plan-Specific Contract Number element (PC008) reported by the payer.</p> <p><b>Notes:</b> This field, encrypted during submission by the payer, has been encrypted again upon receipt by Onpoint CDM using the same algorithm across all payers.</p>
PC009	ENCRYPT_PAT_SEQ	Encrypted Member Suffix or Sequence Number	VARCHAR2	64	<p><b>Description:</b> This field contains a code that uniquely identifies the member within the context of the Member Detail data set's Encrypted Subscriber Social Security Number element (ENCRYPT_ESSN) or this data set's Encrypted Plan-Specific Contract Number element (ENCRYPT_CONTRACT).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint based on an encryption of the Member Suffix or Sequence Number field (PC009) reported by the payer.</p>

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC806	MEMBERIDN	Member ID Number	NUMBER	22	<p><b>Description:</b> This field contains an ID number that generally represents a unique individual.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Member Detail supporting data set using the Member Record ID Number element (IDN; DWMEM801).</p> <p><b>Notes:</b> This field should not be used to aggregate all records associated with a member.</p>
PC809	REL	Individual Relationship to Subscriber	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's relationship to the subscriber or the insured.</p> <p><b>Origin:</b> This field is supplied as reported by payers.</p> <p><b>Linkage:</b> When approved for release, this field links to the Relationship Codes reference data set using the Individual Relationship to Subscriber Code element (CODE; DWREL802).</p>
PC810	GENDER	Member Gender (Standardized)	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's gender.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint to standardize the reporting of gender across submitted file types. Its source is the Member Gender element (PC012) reported by the payer in the pharmacy claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Gender Codes reference data set using the Member Gender Code element (CODE; DWGEN802).</p>
PC811	HIPAA_AGE	Member Age (90+ Aggregate)	NUMBER	3	<p><b>Description:</b> This field contains the member's age.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Member Date of Birth element (PC013) reported by the payer in the pharmacy claims data.</p> <p><b>Notes:</b> This field is calculated during the encryption process as of the Date Prescription Filled element (FILL_DATE; PC032). For children under the age of 1, this value will be 0. If no date of birth is available, this value will be -1. In observance of HIPAA regulations, individuals who are 90 years of age or older will be aggregated and coded as 90.</p>
PC016	PAT_ZIPCODE	Member ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field contains the member's ZIP code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the ZIP Code element (CODE; DWGEO802).</p>

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC812	PAT_ZIPCODEID	Member ZIP Code ID	NUMBER	20	<p><b>Description:</b> This field contains the ID number for the Member ZIP Code element (PAT_ZIPCODE; PC016).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the Geographic Record ID element (ID; DWGEO801).</p> <p><b>Notes:</b> While the required format is numeric, this field is stored in the warehouse as text to preserve any leading zeroes. The ZIPCODEID field was created for efficient processing of large data sets. Use this field when summarizing data by geographic area.</p>
PC816	FIRST_PAID_DATE	First Paid Date	DATE	8	<p><b>Description:</b> This field contains the first paid date associated with the claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> While multiple paid dates may occur for the same claim as part of the adjudication process, this field contains the first paid date associated with the claim. For claims that were not adjusted, this is the actual paid date.</p>
PC817	FIRST_PAID_DATEID	First Paid Date ID Number	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the First Paid Date element (FIRST_PAID_DATE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
PC818	LAST_PAID_DATE	Last Paid Date	DATE	8	<p><b>Description:</b> This field contains the last paid date associated with the claim.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Date Service Approved element (PC017) reported by the payer in the pharmacy claims data.</p> <p><b>Notes:</b> While multiple paid dates may occur for the same claim as part of the adjudication process, this field contains the last paid date associated with the claim. For claims that were not adjusted, this is the actual paid date.</p>

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC819	LAST_PAID_DATEID	Last Paid Date ID Number	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Last Paid Date element (LAST_PAID_DATE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
PC824	SVC_PHARMIDN	Pharmacy ID Number	NUMBER	20	<p><b>Description:</b> This field contains the pharmacy ID number.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Pharmacy Detail supporting data set using the Pharmacy Record ID Number element (IDN; DWPHRMD801).</p> <p><b>Notes:</b> This field cannot be used to aggregate all claims associated with a pharmacy.</p>
PC025	CLAIM_STATUS	Claim Status	NUMBER	2	<p><b>Description:</b> This field contains a code that indicates the status of the claim.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Claim Status Codes reference data set using the Claim Status Code element (CODE; DWCLMS802).</p>
PC026	NDC	National Drug Code	VARCHAR2	11	
PC027	DRUG_NAME	Drug Name	VARCHAR2	80	<p><b>Description:</b> This field contains the text name of the drug indicated in the National Drug Code element (NDC; PC026).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>



RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC028	NEWPR	New Prescription or Refill	VARCHAR2	2	<p><b>Description:</b> This field contains a code that can be used to determine whether this is a new prescription or instead is a refill.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> Valid codes include:</p> <p>00..... New prescription 01–99..... Number of refill(s)</p> <p>Note that a value of 01 may have been reported if the specific number of the prescription refill was unavailable.</p>
PC029	GENERIC	Generic Drug Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether the drug is a branded drug or instead is a generic drug.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Generic Drug Codes reference data set using the Generic Drug Indicator Code element (CODE; DWGEND802).</p>
PC030	DAW	Dispense as Written Code	NUMBER	2	<p><b>Description:</b> This field indicates the instructions given to the pharmacist for filling the prescription.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to Dispense as Written Codes reference data set using the Dispense as Written Code element (CODE; DWD802).</p>
PC031	COMPOUND_DRUG	Compound Drug Indicator	VARCHAR2	2	<p><b>Description:</b> This field indicates whether or not this is a compound drug.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Compound Drug codes reference data set using the Compound Drug Indicator Code element (CODE; DWCOMD802).</p>
PC032	FILL_DATE	Date Prescription Filled	DATE	8	<p><b>Description:</b> This field contains the date the prescription was filled.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC825	FILL_DATEID	Date Prescription Filled ID Number	NUMBER	10	<p><b>Description:</b> This field contains the ID number for the Date Prescription Filled element (FILL_DATE; PC032).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p> <p><b>Notes:</b> The DATEID field was created for efficient processing of large data sets. Use this field when summarizing data by quarter, day of week, etc.</p>
PC033	QTY	Quantity Dispensed	NUMBER	10,2	<p><b>Description:</b> This field identifies the total unit dosage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field may contain a negative value.</p>
PC034	DAY_SUPPLY	Days' Supply	NUMBER	5	<p><b>Description:</b> This field contains the actual days' supply for the prescription based on the Quantity Dispensed element (QTY; PC033).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This field may contain a negative value.</p>
PC829	THIRTY_DAY_EQUIV	Thirty Day Equivalency	NUMBER	3	<p><b>Description:</b> This field is used to indicate the number of thirty day equivalencies associated with this prescription.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Days' Supply field (DAY_SUPPLY; PC034).</p>
PC035	CHARGE	Gross Amount Due	NUMBER	10,2	<p><b>Description:</b> This field contains the gross amount due (total charges) for the service as reported by the provider.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This is a money field containing dollars and cents. This field may contain a negative value.</p>
PC036	PAID	Paid Amount	NUMBER	10,2	<p><b>Description:</b> This field contains the total dollar amount paid to the provider, including all health plan payments and excluding withhold amounts and all member payments.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This is a money field containing dollars and cents. This field may contain a negative value.</p>

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC037	INGREDIENT_COST	<b>Ingredient Cost / List Price</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the cost of the drug that was dispensed.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This is a money field containing dollars and cents. This field may contain a negative value.</p>
PC038	POSTAGE	<b>Postage Cost</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the cost of postage included in the Paid Amount field (PAID; PC036).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This is a money field containing dollars and cents. This field may contain a negative value.</p>
PC039	DISPENSE_FEE	<b>Dispensing Fee</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the amount charged for dispensing.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> This is a money field containing dollars and cents. This field may contain a negative value.</p>
PC040	COPAY	<b>Copay Amount</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the preset, fixed dollar amount payable by a member, often on a per-visit/-service basis.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> Not all carriers can distinguish between the mutually exclusive fields of Copay Amount and Coinsurance Amount (COINSURANCE; PC041). To determine the total out-of-pocket/member responsibility for this service, you must sum these two fields with the Deductible Amount (DEDUCTIBLE; PC042). This is a money field containing dollars and cents. This field may contain a negative value.</p>
PC041	COINSURANCE	<b>Coinsurance Amount</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the dollar amount that a member must pay toward the cost of a covered service.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> In many health insurance plans, the member's coinsurance responsibility is capped after a certain dollar amount of eligible expenses has been incurred. Not all carriers can distinguish between the mutually exclusive fields of Copay Amount (COPAY; PC040) and Coinsurance Amount. To determine the total out-of-pocket/member responsibility for this service, you must sum these two fields with Deductible Amount (DEDUCTIBLE; PC042). This is a money field containing dollars and cents. This field may contain a negative value.</p>

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC042	DEDUCTIBLE	<b>Deductible Amount</b>	NUMBER	10,2	<p><b>Description:</b> This field contains the dollar amount that a member must pay before health plan benefits will begin to reimburse for services.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Notes:</b> It is usually an annual amount of all healthcare costs that are not covered by the member's insurance plan. To determine the total out-of-pocket/member responsibility for this service, you must sum this field with both Copay Amount (COPAY; PC040) and Coinsurance Amount (COINSURANCE; PC041). This is a money field containing dollars and cents. This field may contain a negative value.</p>
PC830	RX_PRVIDN	<b>Prescribing Physician ID Number</b>	NUMBER	20	<p><b>Description:</b> This field contains the prescribing physician's ID number.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Provider Detail data set using the Provider ID Number element (IDN; DWPRVD801).</p> <p><b>Notes:</b> This field cannot be used to aggregate all claims associated with a physician.</p>
PC831	MEDICARE_COV_FLAG	<b>Medicare Coverage Flag</b>	VARCHAR2	1	<p><b>Description:</b> This field indicates whether or not the claim is for a member who also has Medicare coverage.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element (PC003) reported by the payer.</p> <p><b>Notes:</b> Valid codes include: Y (Yes) and N (No).</p>
PC833	USEFLAG	<b>Use Flag</b>	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to include or exclude standard categories of claims for analysis.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Use Flag Codes reference data set using the Use Flag Code element (CODE; DWUSE802).</p>
PC834	EXTRACT_DATE	<b>Warehouse Effective Date</b>	DATE	8	<p><b>Description:</b> This field contains the effective date for the consolidated data warehouse.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> All records within this data set will contain the same date corresponding to the version of the warehouse.</p>

RX_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
PC835	AID_CATEGORY	Aid Category	VARCHAR2	2	<p><b>Description:</b> This field identifies the member's aid category based on service date.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> When approved for release, this field links to the Aid Category Codes reference data set using the Aid Category Code element (CODE; DWAIDCAT802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
PC836	SUBMITTER_SOURCE_ID	Submitter Source	NUMBER	2	<p><b>Description:</b> This field identifies the type of submitter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (PC001) reported by the payer in the pharmacy claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Submitter Source Codes reference data set using the Submitter Source Code element (CODE; DWSUBSRC802).</p>
PC837	PLAN_TYPE_ID	Plan Type	NUMBER	2	<p><b>Description:</b> This field identifies the type of plan.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element (PC003) reported by the payer in the pharmacy claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Plan Type Codes reference data set using the Plan Type Code element (CODE; DWPLANT802).</p>
PC838	AGE_65_FLAG	65 and Over Flag	VARCHAR2	1	This value-added field identifies whether the member is 65 years of age or older. This is based on the HIPAA_AGE field which is derived from the date of birth submitted by the payer.
PC839	OUT_OF_STATE_FLAG	Out of State Flag	VARCHAR2	1	This value-added field identifies whether the member is domiciled within the state of Vermont. It is based on the PAT_ZIPCODE in the claims data set.
PC840	MEDICARE_FLAG	Medicare Product Flag	VARCHAR2	1	This value-added field identifies Medicare products. It is based on the PRODUCT field, which is submitted by the payer.
PC450	EXTERNAL_MEMBER_IDENTIFIER	External Member Identifier	VARCHAR	15	<p><b>Description:</b> This field contains an identifier assigned by Medicare.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare members.</p>

## Pharmacy Detail

The detailed pharmacy data set ([PHARMACY\\_DETAIL](#)) provides detailed servicing pharmacy information with one record for each unique combination of payer and pharmacy information. It links to the pharmacy claims data by the Pharmacy ID Number element ([SVC\\_PHARMIDN](#)).

PHARMACY_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPHRMD801	IDN	Pharmacy Record ID Number	NUMBER	20	<p><b>Description:</b> This field is the primary identification number for each Pharmacy Detail record.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Pharmacy ID Number element (SVC_PHARMIDN) in the pharmacy claims data.</p>
DWPHRMD802	PAYERID	Payer ID Number	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (PC001) reported by the payer in the pharmacy claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>
DWPHRMD803	UNIQ_ID	Unique Pharmacy ID Key	NUMBER	20	<p><b>Description:</b> This field contains the Unique Pharmacy ID Key assigned by Onpoint CDM as part of its routine processing.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This is not reviewed by staff and consequently is not a reliable field for reporting on pharmacies across payers.</p>
DWPHRMD804	PID	Pharmacy Number	VARCHAR2	40	<p><b>Description:</b> This field contains the payer-assigned pharmacy number.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Pharmacy Number element (PC018) reported in the pharmacy claims data.</p>
DWPHRMD805	TAXID	Pharmacy Tax ID Number	VARCHAR2	100	<p><b>Description:</b> This field contains the pharmacy's federal tax ID number.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Pharmacy Tax ID Number element (PC019) reported in the pharmacy claims data.</p> <p><b>Notes:</b> If the individual retail pharmacy tax ID number is not available, this field contains the pharmacy chain's tax ID number.</p>

PHARMACY_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPHRMD806	PHARMACY_NAME	Pharmacy Name	VARCHAR2	100	<p><b>Description:</b> This field contains the name of the pharmacy.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Pharmacy Name element (PC020) reported in the pharmacy claims data.</p>
DWPHRMD807	NPI	National Pharmacy ID Number	VARCHAR2	20	<p><b>Description:</b> This field contains the National Pharmacy ID Number.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the National Pharmacy ID Number element (PC021) reported in the pharmacy claims data.</p>
DWPHRMD808	ZIPCODE	Pharmacy Location ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field contains the ZIP code of the pharmacy location.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Pharmacy ZIP Code element (PC024) reported in the pharmacy claims data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the ZIP Code element (CODE; DWGEO802).</p>
DWPHRMD809	ZIPCODEID	Pharmacy Location ZIP Code ID	NUMBER	20	<p><b>Description:</b> This field contains the ID number for the Pharmacy Location ZIP Code element (ZIPCODE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the Geographic Record ID element (ID; DWGEO801).</p> <p><b>Notes:</b> While the required format is numeric, this field is stored in the warehouse as text to preserve any leading zeroes. The ZIPCODEID field was created for efficient processing of large data sets. Use this field when summarizing data by geographic area.</p>
DWPHRMD810	COUNTRY	Pharmacy Location Country	VARCHAR2	30	<p><b>Description:</b> This field contains the country name of the pharmacy location.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Pharmacy Country element (PC024A) reported in the pharmacy claims data.</p>

## Pharmacy Membership

The pharmacy membership data set contains one record for each month of pharmacy coverage for an individual. This table is divided between commercial ([RX\\_MEMBERSHIP](#)), Medicaid ([RX\\_MEMBERSHIP\\_MEDICAID](#)), and Medicare ([RX\\_MEMBERSHIP\\_MEDICARE](#)) members. (**Note:** Newly added fields pertaining only to Medicare data have been highlighted at the end of this core table in [orange](#).) When the [RX\\_MEMBERSHIP](#) data set is released and organized by service year, the data sets will be appended with a [\\_CCYY](#) suffix to reflect the year of service.

RX_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM801	IDN	Pharmacy Membership Record ID Number	NUMBER	20	<b>Description:</b> This field is the primary identification number for each pharmacy membership record.  <b>Origin:</b> This is a value-added field created by Onpoint.
DWPM802	PAYERID	Payer ID Number	NUMBER	8	<b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.  <b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (ME001) reported by the payer in the member eligibility data.  <b>Linkage:</b> When approved for release, this field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).
DWPM803	AFF_PAYER	Affiliated Payer	VARCHAR2	30	<b>Description:</b> When populated, this field contains the payer code (assigned by Onpoint and distributed to submitters) for the reporter's parent company.  <b>Origin:</b> This field is supplied as reported by the payer. Its source is the Payer element (ME002) reported in the member eligibility file.  <b>Notes:</b> This field does not contain the National Plan ID (NPI).
DWPM804	PRODUCT	Product Code	VARCHAR2	2	<b>Description:</b> This field contains a code that identifies the member's type of insurance or insurance product.  <b>Origin:</b> This field is supplied as reported by the payer. Its source is the Insurance Type / Product Code element reported by the payer in the member eligibility (ME003) data.  <b>Linkage:</b> When approved for release, this field links to the Product Codes reference data set using the Product Code element (CODE; DWPROD802).



## RX\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM805	MTIME	<b>Membership Year &amp; Month</b>	NUMBER	6	<p><b>Description:</b> This field combines the Year (ME004) and Month (ME005) elements reported by the payer in the member eligibility data into a single field.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field has a format of CCYYMM.</p>
DWPM806	PERIODID	<b>Period ID Number</b>	NUMBER	10	<p><b>Description:</b> This field contains an ID number for the Membership Year &amp; Month element (MTIME; DWMM805).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Date reference data set using the Date Record ID element (ID; DWDAT801).</p>
DWPM807	INS_GROUP	<b>Insured Group or Policy Number</b>	VARCHAR2	50	<p><b>Description:</b> This field contains the insured group or policy number associated with the entity that has purchased the insurance.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Insured Group or Policy Number element (ME006) reported in the member eligibility data.</p> <p><b>Notes:</b> For self-insured individuals, this relates to the purchaser. For the majority of eligibility and claims data, the group relates to the employer. The group number does not uniquely identify the subscriber.</p>
DWPM808	INS_GROUP_NAME	<b>Insured Group Name</b>	VARCHAR2	128	<p><b>Description:</b> This field contains the name of the group that covers the member.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Group Name element (ME032) reported in the member eligibility data.</p> <p><b>Notes:</b> If the member is part of a group of one or part of a non-group policy (i.e., when the Market Category Code [MARKET_CATEGORY] is coded as IND, FCH, GCV, or GS1), this field will be null (or display the value BLANK).</p>
DWPM809	COVERAGE_LEVEL	<b>Coverage Level</b>	VARCHAR2	3	<p><b>Description:</b> This field contains a code that indicates the level of coverage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Coverage Level Code element (ME007) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Coverage Level Codes reference data set using the Coverage Level Code element (CODE; DWCVL802).</p>

RX_MEMBERSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM810	ENCRYPT_CONTRACT	Double-Encrypted Plan-Specific Contract Number	VARCHAR2	272	<p><b>Description:</b> This field contains a double-encrypted version of the payer-assigned contract number for the subscriber.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. This field's source is the encrypted Plan-Specific Contract Number element (ME009) reported by the payer.</p> <p><b>Notes:</b> This field, encrypted during submission by the payer, has been encrypted again upon receipt by Onpoint CDM using the same algorithm across all payers.</p>
DWPM811	ENCRYPT_PAT_SEQ	Encrypted Member Suffix or Sequence Number	VARCHAR2	64	<p><b>Description:</b> This field contains a code that uniquely identifies the member within the context of the Member Detail data set's Encrypted Subscriber Social Security Number element (ENCRYPT_ESSN; DWMEM805) or this data set's Encrypted Plan-Specific Contract Number element (ENCRYPT_CONTRACT).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint based on an encryption of the Member Suffix or Sequence Number element (ME010) reported in the member eligibility data.</p>
DWPM812	MEMBERIDN	Member ID Number	NUMBER	22	<p><b>Description:</b> This field contains an ID number that generally represents a unique individual.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Member Detail supporting data set using the Member Record ID Number element (IDN; DWMEM801).</p> <p><b>Notes:</b> This field should not be used to aggregate all records associated with a member.</p>
DWPM814	REL	Individual Relationship to Subscriber (Standardized)	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's relationship to the subscriber or the insured.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint to standardize the reporting of relationship codes across submitted file types. Its source is the Individual Relationship Code element reported by the payer in the member eligibility (ME012) data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Relationship Codes reference data set using the Individual Relationship to Subscriber Code element (CODE; DWREL802).</p>
DWPM815	GENDER	Member Gender	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the member's gender.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Member Gender element (ME013) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Gender Codes reference data set using the Member Gender Code element (CODE; DWGEN802).</p>

## RX\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM816	HIPAA_AGE	Member Age (90+ Aggregate)	NUMBER	3	<p><b>Description:</b> This field contains the member's age.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Member Date of Birth element (ME014) reported by the payer in the member eligibility data.</p> <p><b>Notes:</b> This field is calculated during the encryption process as of the first day of the membership month (ME004) and year (ME005) as reported by the payer in the member eligibility data. For children under the age of 1, this value will be 0. If no date of birth is available, this value will be -1. In observance of HIPAA regulations, individuals who are 90 years of age or older will be aggregated and coded as 90.</p>
DWPM818	PAT_ZIPCODE	Member ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field contains the member's ZIP code.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Member ZIP Code element (ME017) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the ZIP Code element (CODE; DWGEO802).</p>
DWPM819	PAT_ZIPCODEID	Member ZIP Code ID	NUMBER	20	<p><b>Description:</b> This field contains the ID number for the Member ZIP Code element (PAT_ZIPCODE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Geography reference data set using the Geographic Record ID element (ID; DWGEO801).</p> <p><b>Notes:</b> While the required format is numeric, this field is stored in the warehouse as text to preserve any leading zeroes. The ZIPCODEID field was created for efficient processing of large data sets. Use this field when summarizing data by geographic area.</p>
DWPM823	MEDICAL_COV_FLAG	Medical Coverage Flag	VARCHAR2	1	<p><b>Description:</b> This field contains a code that indicates whether or not the member has medical coverage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Medical Coverage element (ME018) reported in the member eligibility data.</p> <p><b>Notes:</b> Valid codes include: Y (Yes) and N (No).</p>
DWPM824	RX_COV_FLAG	Prescription Drug Coverage Flag	VARCHAR2	1	<p><b>Description:</b> This field contains a code that indicates whether or not the member has prescription drug coverage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Prescription Drug Coverage element (ME019) reported in the member eligibility data.</p> <p><b>Notes:</b> Valid codes include: Y (Yes) and N (No).</p>

## RX\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM825	PRIMARY_INS	Primary Insurance Indicator	NUMBER	2	<p><b>Description:</b> This field contains a code that indicates if the member has primary coverage or instead has secondary/tertiary coverage.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Primary Insurance Indicator element (ME028) reported in the member eligibility data.</p> <p><b>Notes:</b> Valid codes include:</p> <p>1..... Yes, primary insurance  2..... No, secondary or tertiary insurance  -1 ..... Not specified (no primary insurance indicator reported)  -2 ..... Not valid (invalid primary insurance indicator reported)</p>
DWPM826	COVERAGE_TYPE	Coverage Type	VARCHAR2	3	<p><b>Description:</b> This field contains a code that indicates the type of coverage and is used to distinguish self-funded plans from commercially insured plans.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Coverage Type element (ME029) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Coverage Type Codes reference data set using the Coverage Type Code element (CODE; DWCVT802).</p>
DWPM827	MARKET_CATEGORY	Market Category Code	VARCHAR2	4	<p><b>Description:</b> This field contains a code that indicates the type of policy sold by the insurer.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Market Category Code element (ME030) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Market Category Codes reference data set using the Market Category Code element (CODE; DWMKTC802).</p>
DWPM828	BPMH	Blueprint Medical Home Indicator	VARCHAR2	2	<p><b>Description:</b> This field contains the Blueprint Medical Home (BPMH) Indicator.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the BPMH Indicator element (ME031) reported in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Blueprint Medical Home Indicator Codes reference data set using the Blueprint Medical Home Indicator Code element (CODE; DWBPMH802).</p> <p><b>Notes:</b> Since the Blueprint Medical Home Indicator field is based on data as submitted by payers, its accuracy and completeness cannot be validated.</p>

## RX\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM829	MEDICARE_COV_FLAG	Medicare Coverage Flag	VARCHAR2	1	<p><b>Description:</b> This field contains a code that indicates whether or not the claim is for a member who also has Medicare coverage.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element (ME003) reported by the payer in the member eligibility data.</p> <p><b>Notes:</b> Valid codes include: Y (Yes) and N (No).</p>
DWPM830	USEFLAG	Use Flag	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to indicate the relationship of this membership record to other membership records for the same member and time period.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> When approved for release, this field links to the Use Flag Codes reference data set using the Use Flag Code element (CODE; DWUSE802).</p> <p><b>Notes:</b> If two records have the same member identifiers, the same payer, and the same year and month of eligibility, one record will be flagged as an intra-payer duplicate and should not be used in counting member months. If a member has a membership record for full medical coverage and a membership record for a specific area of coverage (e.g., mental health and substance abuse), the specific coverage area record will be flagged as an inter-payer duplicate. In general, the inter-payer record should not be used when counting member months.</p>
DWPM831	EXTRACT_DATE	Warehouse Effective Date	DATE	8	<p><b>Description:</b> This field contains the effective date for the consolidated data warehouse.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> All records within this data set will contain the same date corresponding to the version of the warehouse.</p>
DWPM832	AID_CATEGORY	Aid Category	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies the member's aid category based on service date.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Aid Category element (ME201) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Aid Category Codes reference data set using the Aid Category Code element (CODE; DWIDCAT802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

## RX\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM833	DUAL_COV_FLAG	Dual Coverage Flag	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies whether or not a member had both Medicaid and Medicare coverage (i.e., dual coverage) for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Dual-Coverage element (ME202) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Dual-Coverage Codes reference data set using the Dual-Coverage Flag Code element (CODE; DWDCOV802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWPM834	FULL_COV_FLAG	Full Coverage Flag	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies whether or not a member had full Medicaid coverage for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Full Medicaid element (ME203) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Full-Coverage Codes reference data set using the Full-Coverage Flag Code element (CODE; DWFCOV802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWPM835	LTCARE_COV_FLAG	Long-Term Care Coverage Flag	VARCHAR2	2	<p><b>Description:</b> This field contains a code that identifies whether or not a member had long-term care coverage for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the LTC Flag element (ME205) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Long-Term Care Coverage Codes reference data set using the Long-Term Care Coverage Flag Code element (CODE; DWLTCCOV802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

## RX\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM836	FPL	Federal Poverty Level	NUMBER	5,2	<p><b>Description:</b> This field identifies the member's federal poverty level (FPL) for the reported membership month.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Federal Poverty Level element (ME206) reported in the member eligibility file.</p> <p><b>Notes:</b> An FPL of 100.00% indicates that the member was living at the FPL; values above and below 100.00% indicate that the member was living above or below, respectively, the federal poverty level. This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWPM837	BLUESA	Blueprint Service Area	NUMBER	4	<p><b>Description:</b> This field contains a code that identifies the member's Blueprint Service Area.</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Blueprint Service Area element (ME207) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Blueprint Service Area Codes reference data set using the Blueprint Service Area Code element (CODE; DWBLUESA802).</p> <p><b>Notes:</b> This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWPM838	CHRONIC_CARE_FLAG	Chronic Care Indicator	NUMBER	2	<p><b>Description:</b> This field contains a code that identifies Medicaid beneficiaries attributed to the Vermont Chronic Care Initiative (VCCI).</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid. Its source is the Chronic Care Indicator element (ME211) reported in the member eligibility file.</p> <p><b>Linkage:</b> When approved for release, this field links to the Chronic Care Codes reference data set using the Chronic Care Flag Code element (CODE; DWCCARE802).</p> <p><b>Notes:</b> Under the Vermont Chronic Care Initiative program, beneficiaries are enrolled for select conditions; once a condition is managed and under control, beneficiaries become inactive. Given the general health status of the VCCI participant population, beneficiaries often become active again for a different condition. This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWPM839	SUBMITTER_SOURCE_ID	Submitter Source	NUMBER	2	<p><b>Description:</b> This field identifies the type of submitter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Payer element (ME001) submitted in the member eligibility data.</p> <p><b>Linkage:</b> When approved for release, this field links to the Submitter Source Codes reference data set using the Submitter Source Code element (CODE; DWSUBSRC802).</p>

## RX\_MEMBERSHIP

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPM840	PLAN_TYPE_ID	Plan Type	NUMBER	2	<p><b>Description:</b> This field identifies the type of plan.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element reported by the payer in the member eligibility (ME003) data.</p> <p><b>Notes:</b> When approved for release, this field links to the Plan Type Codes reference data set using the Plan Type Code element (CODE; DWPLANT802).</p>
DWPM840	ELIGFLAG	Medicaid Eligibility Flag	NUMBER	1	<p><b>Description:</b> This DVHA-supplied field identifies whether or not a member is an eligible beneficiary as of the 15<sup>th</sup> of the month.</p>
DWPM841	AGE_65_FLAG	65 and Over Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field identifies whether the member is 65 years of age or older. This is based on the HIPAA_AGE field, which is derived from the date of birth submitted by the payer.</p>
DWPM842	OUT_OF_STATE_FLAG	Out-of-State Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field identifies whether the member is domiciled within the state of Vermont. It is based on the PAT_ZIPCODE in the claims data set.</p>
DWPM843	MEDICARE_FLAG	Medicare Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field identifies Medicare products. It is based on the PRODUCT field, which is submitted by the payer.</p>
DWPM844	INTRAPAYER_DUPLICATE_FLAG	Intra-payer Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field de-duplicates membership rows within a payer. It is based on a unique combination of Member, MTIME, and PRODUCT to determine duplicate rows.</p>
DWPM845	INTERPAYER_DUPLICATE_FLAG	Inter-payer Flag	VARCHAR2	1	<p><b>Description:</b> This value-added field de-duplicates membership rows across payers. It is based on a pre-set list of payer relationships, Member, and MTIME to determine duplicate rows.</p>
DWPM851	EXTERNAL_MEMBER_IDENTIFIER	External Member Identifier	VARCHAR	15	<p><b>Description:</b> This field contains an identifier assigned by Medicare.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare members.</p>



# Plan Type Codes

The plan type codes reference data set ([REF\\_PLAN\\_TYPE](#)) includes all valid plan type values and descriptions and links to the Plan Type fields in the medical and pharmacy claims and membership data.

REF_PLAN_TYPE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPLANT802	ID	Plan Type Code	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to identify a specific plan type.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source is the Insurance Type / Product Code element reported by the payer.</p> <p><b>Linkage:</b> This field links to the Plan Type fields (PLAN_TYPE_ID) in the medical and pharmacy claims and membership data.</p>
DWPLANT803	DESCRIPTION	Plan Type Code Description	VARCHAR2	20	<p><b>Description:</b> This field contains the description of the Plan Type Code element (CODE; DWPLANT802).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>

## Practice Attribution

The practice attribution data set includes a per-person record of a member-to-practice relationship over time. This information links to the Member Detail table on [MEMBER\\_UNIQ\\_ID](#) and [MTIME](#). Attribution is divided into three tables based on a member's coverage: commercial ([PRACTICE\\_ATTRIBUTION\\_COMM](#)), Medicaid ([PRACTICE\\_ATTRIBUTION\\_MEDI](#)), and Medicare ([PRACTICE\\_ATTRIBUTION\\_MCARE](#)).

PRACTICE_ATTRIBUTION					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWATTRIB801	MEMBER_UNIQ_ID	Unique Member ID Number	NUMBER	20	<p><b>Description:</b> This field contains the Unique Member ID Number assigned by Onpoint CDM.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field can be used to aggregate all records associated with a member. This field is identical to the Unique Member ID Number reported in the Member Detail table (UNIQ_ID; DWMEM802).</p>
DWATTRIB802	MTIME	Membership Year & Month	NUMBER	6	<p><b>Description:</b> This field combines the Year (ME004) and Month (ME005) elements reported by the payer in the member eligibility data into a single field.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field has a format of CCYYMM.</p>
DWATTRIB803	AFFILIATION_PRACTICE_ID	Practice Identifier	VARCHAR2	100	<p><b>Description:</b> This field contains the roster-specific identifier linked via the attribution algorithm to the specific MTIME and MEMBER_UNIQ_ID.</p> <p><b>Origin:</b> Member attribution is a value-added service performed by Onpoint incorporating information maintained and released by the Medical Home Team.</p>
DWATTRIB804	PRACTICE_NAME	Practice Name	VARCHAR2	100	<p><b>Description:</b> This field contains the practice name associated with the reported Practice Identifier (AFFILIATION_PRACTICE_ID).</p> <p><b>Origin:</b> This value is maintained and released by the Medical Home Team.</p>
DWATTRIB805	CITY	Practice City	VARCHAR2	30	<p><b>Description:</b> This field identifies the city associated with the reported Practice Identifier (AFFILIATION_PRACTICE_ID).</p> <p><b>Origin:</b> This value is maintained and released by the Medical Home Team.</p>

PRACTICE_ATTRIBUTION					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWATTRIB806	STATE	Practice State	VARCHAR2	2	<p><b>Description:</b> This field identifies the state associated with the reported Practice Identifier (AFFILIATION_PRACTICE_ID).</p> <p><b>Origin:</b> This value is maintained and released by the Medical Home Team.</p> <p><b>Notes:</b> This field uses the two-character state abbreviation defined by the U.S. Postal Service.</p>
DWATTRIB807	ZIPCODE	Practice ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field identifies the ZIP code associated with the reported Practice Identifier (AFFILIATION_PRACTICE_ID).</p> <p><b>Origin:</b> This value is maintained and released by the Medical Home Team.</p>
DWATTRIB808	PRACTICE_ORGANIZATION	Practice Organization Name	VARCHAR2	100	<p><b>Description:</b> This field contains the practice organization (or parent company) name associated with the reported Practice Identifier (AFFILIATION_PRACTICE_ID).</p> <p><b>Origin:</b> This value is maintained and released by the Medical Home Team.</p>
DWATTRIB809	MEDICAL_HOME_INIT_BEGIN_DT	Medical Home Initiative Begin Date	DATE	8	<p><b>Description:</b> This field contains the Medical Home active date associated with the reported Practice Identifier (AFFILIATION_PRACTICE_ID).</p> <p><b>Origin:</b> This value is maintained and released by the Medical Home Team.</p>
DWATTRIB810	MEDICAL_HOME_INIT_END_DT	Medical Home Initiative End Date	DATE	8	<p><b>Description:</b> This field contains the Medical Home termination date associated with the reported Practice Identifier (AFFILIATION_PRACTICE_ID).</p> <p><b>Origin:</b> This value is maintained and released by the Medical Home Team.</p>

## Present on Admission Indicator Codes (Medicare)

The Medicare present on admission (POA) indicator codes reference data set ([REF\\_POA\\_IND](#)) includes all valid Medicare POA indicator code values and descriptions and links to the medical claims data.

REF_POA_IND					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPOA801	ID	Present on Admission (POA) Indicator ID	NUMBER	10	<p><b>Description:</b> This field uniquely identifies a present on admission (POA) indicator code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the present on admission (POA) indicator ID fields (POA_DX_IDs) in the medical claims data.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWPOA802	CODE	Present on Admission (POA) Indicator Code	VARCHAR2	2	<p><b>Description:</b> This field is tied to a specific diagnosis and indicates whether or not the condition identified by the related diagnosis was present at the time of admission.</p> <p><b>Origin:</b> Code values are maintained by the National Uniform Billing Committee (NUBC).</p> <p><b>Linkage:</b> This field links to the Present on Admission Indicator fields for multiple elements (e.g., external causes of injury, principal diagnosis, other diagnoses, etc.) in the medical claims data.</p>
DWPOA803	DESCRIPTION	Present on Admission (POA) Indicator Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains a description of the Present on Admission Indicator Code (CODE; DWPOA802).</p> <p><b>Origin:</b> Code values are maintained by the National Uniform Billing Committee (NUBC).</p> <p><b>Notes:</b> Descriptive values for these codes are maintained by the NUBC. This information pertains only to Medicare claims.</p>

# Primary Payer Codes (Medicare)

The Medicare primary payer codes reference data set ([REF\\_PRIMARY\\_PAYER](#)) includes all valid Medicare primary payer code values and descriptions and links to the medical claims data.

REF_PRIMARY_PAYER					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPPC801	ID	Primary Payer Code ID	NUMBER	10	<p><b>Description:</b> This field uniquely identifies a primary payer code.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>
DWPPC802	CODE	Primary Payer Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that specifies a federal non-Medicare program or other source that has primary responsibility for the payment of the Medicare beneficiary's medical bills relating to the line item service on the non-institutional claim.</p> <p><b>Origin:</b> This field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the Primary Payer Code element (PRIMARY_PAYER_CODE; MC446) in the medical claims data.</p>
DWPPC803	DESCRIPTION	Primary Payer Code Description	VARCHAR2	150	<p><b>Description:</b> This field contains a description of the Primary Payer Code element (CODE; DWPPC802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>

# Product Codes

The product codes reference data set ([REF\\_PRODUCT](#)) includes all valid product codes and descriptive demographic information and links to data sets that contain a [PRODUCT](#) field.

REF_PRODUCT					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPROD802	CODE	Product Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific product.</p> <p><b>Origin:</b> This field is supplied as reported by payers using codes contained in the VHCURES collection rule. Values are supplied as reported in the member eligibility (ME003) data; values are standardized by Onpoint for harmonized reporting after being supplied by payers in the medical claims (MC003) and pharmacy claims data (PC003).</p> <p><b>Linkage:</b> This field links to data sets that contain a product code field (PRODUCT).</p>
DWPROD803	DESCRIPTION	Product Code Description	VARCHAR2	255	<p><b>Description:</b> This field contains the description of the Product Code element (CODE; DWPROD802).</p>

## Provider Detail

The detailed provider data set ([PROVIDER\\_DETAIL](#)) provides detailed service provider information with one record for each unique combination of payer and service provider information. It links to the medical claims data by the Service Provider ID Number element ([SVC\\_PRVIDN](#)) and to the pharmacy claims data by Prescribing Physician ID Number ([RX\\_PRVIDN](#)).

PROVIDER_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPRVD801	IDN	Provider ID Number	NUMBER	20	<p><b>Description:</b> This field is the primary identification number for each Provider Detail record.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Service Provider ID Number element (SVC_PRVIDN) in the medical claims data and to the Prescribing Physician ID Number element (RX_PRVIDN) in the pharmacy claims data set.</p>
DWPRVD802	PAYERID	Payer ID Number	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source includes the Payer element reported by the payer in the medical claims (MC001) and pharmacy claims (PC001).</p> <p><b>Linkage:</b> This field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>
DWPRVD803	UNIQ_ID	Unique Provider ID Key	NUMBER	20	<p><b>Description:</b> This field contains the Unique Provider ID Key assigned by Onpoint CDM as part of its routine processing. In-state values below 1,000,000 have been manually reviewed and should be considered reliable.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint</p> <p><b>Linkage:</b> This field links to the provider master data using the Unique Provider ID element (UNIQ_ID; DWPRVM801).</p>

## PROVIDER\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPRVD804	PID	Service Provider Number	VARCHAR2	30	<p><b>Description:</b> This field contains the payer-assigned provider number.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Number element (MC024) reported in the medical claims data.</p> <p><b>Notes:</b> Note that there is no corresponding value in the pharmacy claims data because DEA numbers are non-releasable.</p>
DWPRVD805	PRV_TAXID	Provider Tax ID Number	VARCHAR2	100	<p><b>Description:</b> This field contains the provider's federal tax ID number. For an individual, this code is often the Social Security number.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Tax ID Number element (MC025) reported in the medical claims data.</p>
DWPRVD806	ENTITY_TYPE	Service Provider Entity Type Qualifier	VARCHAR2	1	<p><b>Description:</b> This field contains a code that is used to distinguish an individual practitioner from a business entity.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Entity Type Qualifier element (MC027) reported in the medical claims data.</p> <p><b>Notes:</b> Valid codes include 1 (Person) and 2 (Non-person entity).</p>
DWPRVD807	PRV_FNAME	Provider First Name	VARCHAR2	25	<p><b>Description:</b> This field contains the first name of the individual provider or prescribing physician.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider First Name element (MC028) reported in the medical claims data or the Prescribing Physician First Name element (PC044) reported in the pharmacy claims data.</p> <p><b>Notes:</b> If the provider is a facility, this field will be blank.</p>
DWPRVD808	PRV_MNAME	Provider Middle Name	VARCHAR2	25	<p><b>Description:</b> This field contains the middle name or initial of the individual provider or prescribing physician.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Middle Name element (MC029) reported in the medical claims data or the Prescribing Physician Middle Name element (PC045) reported in the pharmacy claims data.</p>
DWPRVD809	PRV_LNAME	Organization Name or Provider Last Name	VARCHAR2	100	<p><b>Description:</b> This field contains the full name of the provider organization or the last name of the individual provider or prescribing physician.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Last Name or Organization Name element (MC030) reported in the medical claims data or the Prescribing Physician Last Name element (PC046) reported in the pharmacy claims data.</p>



## PROVIDER\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPRVD810	PRV_SUFFIX	Provider Suffix	VARCHAR2	10	<p><b>Description:</b> When populated correctly by payers, this field contains the service provider's generational identifier (e.g., JR, SR, III).</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Suffix element (MC031) reported in the medical claims data.</p>
DWPRVD811	SPECIALTY	Provider Specialty Code	VARCHAR2	100	<p><b>Description:</b> This field contains a code that identifies the service provider's specialty.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Specialty element (MC032) reported in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Provider Specialty reference data set using the Provider Specialty Code element (CODE; DWPRVS802).</p> <p><b>Notes:</b> When linking to REF_PROVIDER_SPECIALTY's Provider Specialty Code element (CODE; DWPRVS802), you also must link to that data set's Payer ID Number element (PAYERID; DWPRVS801) via the Provider Detail data set's Payer ID Number element (PAYERID) because two payers may use the same specialty code with different meanings.</p>
DWPRVD813	STATE	Provider Location State or Province	VARCHAR2	2	<p><b>Description:</b> This field identifies the state of the provider's practice location.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider State or Province element (MC034) reported in the medical claims data.</p> <p><b>Notes:</b> This field uses the two-character state abbreviation defined by the U.S. Postal Service.</p>
DWPRVD814	PRV_ZIPCODE	Provider Location ZIP Code	VARCHAR2	5	<p><b>Description:</b> This field contains the ZIP code of the provider's practice location.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider ZIP Code element (MC035) in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Geography reference data set using the ZIP Code element (CODE; DWGEO802).</p>

## PROVIDER\_DETAIL

Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPRVD815	PRV_ZIPCODEID	<b>Provider Location ZIP Code ID</b>	NUMBER	20	<p><b>Description:</b> This field contains the ID number for Provider Location ZIP Code element (PRV_ZIPCODE).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Geography reference data set using the Geographic Record ID element (ID; DWGEO801).</p> <p><b>Notes:</b> While the required format is numeric, this field is stored as text to preserve any leading zeroes. The ZIPCODEID field was created for efficient processing of large data sets. Use this field when summarizing data by geographic area.</p>
DWPRVD816	COUNTRY	<b>Provider Location Country</b>	VARCHAR2	30	<p><b>Description:</b> This field contains the country name of the provider's practice location.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Country element (MC070) reported in the medical claims data.</p>
DWPRVD817	TAXONOMY	<b>Taxonomy Code</b>	VARCHAR2	10	<p><b>Description:</b> This field contains the CMS-defined code for the provider's specialty/taxonomy.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is determined by cross-referencing the reported provider's specialty code (SPECIALTY) to the Taxonomy Codes reference data set. The American Medical Association (AMA) holds the copyright for the Health Care Provider Taxonomy code set on behalf of the National Uniform Claim Committee, which maintains the coding system. More details can be found at the Taxonomy Codes reference data set.</p>
DWPRVD818	NPI	<b>National Provider ID Number</b>	VARCHAR2	20	<p><b>Description:</b> This field contains the National Provider Identification Number used by the U.S. Centers for Medicare &amp; Medicaid Services (CMS).</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its sources are the National Service Provider ID element (MC026) reported in the medical claims data and the NPI when provided via the Prescribing Physician Number element (PC047) in the pharmacy claims data.</p>

## Provider Master

The provider master data set ([PROVIDER\\_MASTER](#)) supplies master service provider information. Its unique provider records are constructed through provider linkage and work both within and across payers. It links to the [PROVIDER\\_DETAIL](#) data using the Unique Provider ID Key element ([UNIQ\\_ID](#)).

PROVIDER_MASTER					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPRVM801	UNIQ_ID	Unique Provider ID Number	NUMBER	20	<p><b>Description:</b> This field is the primary ID number for each Provider Master record.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Provider Detail data set using the Unique Provider ID Key element (UNIQ_ID; DWPRVD803).</p> <p><b>Notes:</b> This field is used to identify all records associated with a single provider across payers and data reporters.</p>
DWPRVM802	FACILITY_NAME	Service Provider Facility or Organization Name	VARCHAR2	255	<p><b>Description:</b> This field contains the service provider's facility name if the provider has been identified as a non-person entity during the provider linkage process.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>
DWPRVM803	STATE	Provider Location State or Province	VARCHAR2	2	<p><b>Description:</b> This field identifies the state of the provider's practice location.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Provider Location State or Province element (STATE) in the provider detail file.</p> <p><b>Notes:</b> This field uses the two-character state abbreviation defined by the U.S. Postal Service.</p>
DWPRVM804	TAXONOMY	Taxonomy Code	VARCHAR2	10	<p><b>Description:</b> This field contains the CMS-defined code for the provider's specialty/taxonomy.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field is determined by cross-referencing the carrier's specialty code (SPECIALTY) to the Taxonomy Codes reference data set. The American Medical Association (AMA) holds the copyright for the Health Care Provider Taxonomy code set on behalf of the National Uniform Claim Committee, which maintains the coding system. More details can be found at the Taxonomy Codes reference data set.</p>

PROVIDER_MASTER					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPRVM805	PRV_FNAME	Provider First Name	VARCHAR2	255	<p><b>Description:</b> This field contains the first name of the practitioner.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field's source is the provider linkage process. If the provider is a facility, this field will be blank.</p>
DWPRVM806	PRV_MNAME	Provider Middle Name	VARCHAR2	255	<p><b>Description:</b> This field contains the practitioner's middle name or initial.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field's source is the provider linkage process.</p>
DWPRVM807	PRV_LNAME	Service Provider Last Name	VARCHAR2	255	<p><b>Description:</b> This field contains the last name of the individual provider.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field's source is the provider linkage process.</p>
DWPRVM808	PRV_SUFFIX	Service Provider Suffix	VARCHAR2	255	<p><b>Description:</b> When populated correctly by payers, this field contains the service provider's generational identifier (e.g., JR, SR, III).</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p>
DWPRVM809	NPI	National Provider ID Number	VARCHAR2	20	<p><b>Description:</b> This field contains the National Provider Identification Number used by the U.S. Centers for Medicare &amp; Medicaid Services (CMS).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Notes:</b> This field's source is the provider linkage process.</p>

## Provider Specialty Codes

The provider specialty codes reference data set ([REF\\_PROVIDER\\_SPECIALTY](#)) includes all payer-specific specialty codes and links to the [PROVIDER\\_DETAIL](#) data.

REF_PROVIDER_SPECIALTY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWPRVS801	PAYERID	<b>Payer ID Number</b>	NUMBER	8	<p><b>Description:</b> This field contains the Payer ID Number, which is used to identify the data reporter.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint. Its source includes the Payer element (MC001) reported by the payer in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Payers reference data set using the Payer Record ID element (ID; DWPAY801).</p>
DWPRVS802	CODE	<b>Provider Specialty Code</b>	VARCHAR2	50	<p><b>Description:</b> This field contains the specialty code submitted by the payer.</p> <p><b>Origin:</b> This field is supplied as reported by the payer. Its source is the Service Provider Specialty element (MC032) reported in the medical claims data.</p> <p><b>Linkage:</b> This field links to the Provider Detail data set using the Provider Specialty element (SPECIALTY).</p>
DWPRVS803	DESCRIPTION	<b>Provider Specialty Code Description</b>	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Provider Specialty Code element (CODE; DWPRVS802).</p> <p><b>Origin:</b> This field's descriptions include both payer-supplied definitions provided to Onpoint and national taxonomy descriptions.</p>

# Relationship to Subscriber Codes

The relationship to subscriber codes reference data set ([REF\\_RELATIONSHIP](#)) includes all valid member relationship to subscriber codes and descriptions and links to data sets that contain a [REL](#) field.

REF_RELATIONSHIP					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWREL802	CODE	Individual Relationship to Subscriber Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that is used to identify a specific relationship.</p> <p><b>Origin:</b> This field is supplied as reported by payers using codes contained in the VHCURES collection rule. Values are supplied as reported in the medical claims (MC011) and pharmacy claims (PC011) data; values are standardized by Onpoint for harmonized reporting after being supplied by payers in the member eligibility data (ME012).</p> <p><b>Linkage:</b> This field links to data sets that contain an individual relationship to subscriber field (REL).</p>
DWREL803	DESCRIPTION	Individual Relationship to Subscriber Code Description	VARCHAR2	255	<p><b>Description:</b> This field contains the description of the Individual Relationship to Subscriber Code element (CODE; DWREL802).</p> <p><b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.</p>

# Revenue Center Codes

The revenue center codes reference data set ([REF\\_REVCENTER](#)) includes all valid revenue center codes and links to the medical claims data.

REF_REVCENTER					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWREV802	CODE	Revenue Center Code	VARCHAR2	4	<p><b>Description:</b> This field contains the revenue center code reported for hospital medical claims.</p> <p><b>Origin:</b> Code values are maintained by the National Uniform Billing Committee (NUBC).</p> <p><b>Linkage:</b> This field links to the Revenue Center Code element (REV; MC054) in the medical claims data.</p> <p><b>Notes:</b> This field has been padded with leading zeroes if the submitted Revenue Center Code contained fewer than four digits.</p>
DWREV803	DESCRIPTION	Revenue Center Code Description	VARCHAR2	130	<p><b>Description:</b> This field contains the description of the Revenue Center Code element (CODE; DWREV802).</p> <p><b>Origin:</b> Descriptive values for these codes are maintained by the NUBC.</p>

## Service Site Codes

The service site codes reference data set ([REF\\_SERVICE\\_SITE](#)) includes all valid service site values and descriptions and links to the medical claims data.

REF_SERVICE_SITE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWSVCS802	CODE	Service Site (Professional) Code	VARCHAR2	2	<p><b>Description:</b> This field is the primary identification key for each service site record.</p> <p><b>Origin:</b> This field is supplied as reported by the payer.</p> <p><b>Linkage:</b> This field links to the Service Site (Professional) element (SVC_SITE_TYPE; MC037) in the medical claims data.</p> <p><b>Notes:</b> This field is to be reported for professional claims only.</p>
DWSVCS803	DESCRIPTION	Service Site (Professional) Code Description	VARCHAR2	75	<p><b>Description:</b> This field contains the description of the Service Site (Professional) Code element (CODE; DWSVS802).</p> <p><b>Origin:</b> Descriptive values are supplied as recorded in the collection rule.</p>



## Submitter Source Codes

The submitter source codes reference data set ([REF\\_SUBMITTER\\_SOURCE](#)) includes all valid submitter source values and descriptions and links to the Submitter Source fields in the medical and pharmacy claims and membership data.

REF_SUBMITTER_SOURCE					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWSUBSRC802	CODE	Submitter Source Code	NUMBER	2	<p><b>Description:</b> This field contains a code that is used to identify whether a submitter is a private or governmental payer.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Submitter Source field (SUBMITTER_SOURCE_ID) in the medical and pharmacy claims and membership data.</p>
DWSUBSRC803	DESCRIPTION	Submitter Source Code Description	VARCHAR2	20	<p><b>Description:</b> This field contains the description of the Submitter Source Code element (CODE; DWSUBSRC802).</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p>

# Taxonomy Codes

The taxonomy codes reference data set ([REF\\_TAXONOMY](#)) includes all valid taxonomy codes and descriptions and links to data sets that contain a [TAXONOMY](#) field.

The [Health Care Provider Taxonomy code set](#) is an external, nonmedical data code set originally designed by the Accredited Standards Committee Electronic Data Interchange (ASC X12N) and the U.S. Centers for Medicare & Medicaid Services (CMS). It is updated twice each year, released free of charge, and maintained by the National Uniform Claim Committee ([NUCC](#)). The Health Care Provider Taxonomy code set is published in cooperation with the NUCC by the American Medical Association (AMA). Permission is granted to any individual to copy and use the material as long as the copyright statement is included, the contents are not changed, and the copies are not sold or licensed. Applicable FARS/DFARS restrictions apply. For the latest code values, visit the [NUCC website](#).

REF_TAXONOMY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWTAX802	CODE	<b>Taxonomy Code</b>	VARCHAR2	10	<p><b>Description:</b> This field contains the CMS-defined code for a provider's taxonomy.</p> <p><b>Origin:</b> This field's values are supplied as reported by CMS.</p> <p><b>Linkage:</b> This field links to the Taxonomy elements (TAXONOMY) in the provider detail and provider master data sets.</p> <p><b>Notes:</b> The American Medical Association (AMA) holds the copyright for the Health Care Provider Taxonomy code set on behalf of the National Uniform Claim Committee.</p>
DWTAX803	TAX_CAT	<b>Category</b>	VARCHAR2	37	<p><b>Description:</b> This field contains the category (or general type) of the provider and indicates whether or not the provider is an individual based on the Taxonomy Code element (CODE; DWTAX802).</p> <p><b>Origin:</b> This field's values are supplied as reported by CMS.</p> <p><b>Notes:</b> The American Medical Association (AMA) holds the copyright for the Health Care Provider Taxonomy code set on behalf of the National Uniform Claim Committee.</p>

REF_TAXONOMY					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWTAX804	TAX_PRV_TYPE	Provider Type	VARCHAR2	76	<p><b>Description:</b> This field contains the Health Care Provider Taxonomy code that identifies a major grouping of service(s) or occupation(s) of healthcare providers (e.g., Allopathic &amp; Osteopathic Physicians, Dental Providers, Hospitals, etc.) based on the Category element (TAX_CAT).</p> <p><b>Origin:</b> This field's values are supplied as reported by CMS.</p> <p><b>Notes:</b> The American Medical Association (AMA) holds the copyright for the Health Care Provider Taxonomy code set on behalf of the National Uniform Claim Committee.</p>
DWTAX805	TAX_CLASS	Classification	VARCHAR2	100	<p><b>Description:</b> This field contains the Health Care Provider Taxonomy code that identifies a more specific service or occupation related to the Provider Type element (TAX_PRV_TYPE).</p> <p><b>Origin:</b> This field's values are supplied as reported by CMS.</p> <p><b>Notes:</b> The American Medical Association (AMA) holds the copyright for the Health Care Provider Taxonomy code set on behalf of the National Uniform Claim Committee.</p>
DWTAX806	TAX_SPECIALTY	Area of Specialization	VARCHAR2	71	<p><b>Description:</b> This field contains the Health Care Provider Taxonomy code that identifies a more specialized area of the Classification element (TAX_CLASS) in which a provider chooses to practice or make services available.</p> <p><b>Origin:</b> This field's values are supplied as reported by CMS.</p> <p><b>Notes:</b> The American Medical Association (AMA) holds the copyright for the Health Care Provider Taxonomy code set on behalf of the National Uniform Claim Committee.</p>

## TCRRV

The Total Care Relative Resource Value (TCRRV) data set includes all TCRRV values calculated for members with verified linkage between the eligibility and claims data. This table is divided between commercial ([TCRRV\\_DETAIL\\_COMM](#)), Medicaid ([TCRRV\\_DETAIL\\_MEDI](#)), and Medicare ([TCRRV\\_DETAIL\\_MCARE](#)) members.

TCRRV_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWTCRRV801	MEMBERID	Unique Member ID Number	NUMBER	20	<p><b>Description:</b> This field contains the Unique Member ID code assigned by Onpoint CDM.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint.</p> <p><b>Linkage:</b> This field links to the Member Detail table using the Unique Member ID Number field (UNIQ_ID; DWMEM802).</p> <p><b>Notes:</b> This field can be used to aggregate all records associated with a member. This field is identical to the Unique Member ID Number reported in the Member Detail table (UNIQ_ID; DWMEM802).</p>
DWTCRRV802	YR	Data Year	NUMBER	4	<p><b>Description:</b> This field identifies the data year used to calculate the reported TCRRVs.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint based on the Date of Service (From) element (FIRST_SVC_DATE; MC059) reported by the submitter in the medical claims data. This field is reported with a format of CCYY.</p>
DWTCRRV803	RX_LINKFLAG	Pharmacy Linkage Indicator	NUMBER	8	<p><b>Description:</b> This field contains a code that indicates whether or not the member was linked to the pharmacy claims data.</p> <p><b>Origin:</b> This is a value-added field created by Onpoint based on member linkage and the Prescription Drug Coverage element (ME019) reported in the member eligibility data by the submitter.</p> <p><b>Notes:</b> Valid codes include:</p> <p>0..... Not linked to the claims data / Linked but flagged as having no prescription drug coverage based on ME019</p> <p>1..... Linked to the pharmacy claims data</p>

TCRRV_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWTCRRV804	TOT_DDTCCRV	Total TCRRV (Adjusted)	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's total TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p> <p><b>Notes:</b> This TCRRV has been adjusted using HealthPartners' data-derived adjustment factors based on Vermont data.</p>
DWTCRRV805	IP_DDTCCRV	Inpatient TCRRV (Adjusted)	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's inpatient TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p> <p><b>Notes:</b> This TCRRV has been adjusted using HealthPartners' data-derived adjustment factors based on Vermont data.</p>
DWTCRRV806	OP_DDTCCRV	Outpatient TCRRV (Adjusted)	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's outpatient TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p> <p><b>Notes:</b> This TCRRV has been adjusted using HealthPartners' data-derived adjustment factors based on Vermont data.</p>
DWTCRRV807	PR_DDTCCRV	Professional TCRRV (Adjusted)	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's professional TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p> <p><b>Notes:</b> This TCRRV has been adjusted using HealthPartners' data-derived adjustment factors based on Vermont data.</p>
DWTCRRV808	RX_DDTCCRV	Pharmacy TCRRV (Adjusted)	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's pharmacy TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p> <p><b>Notes:</b> This TCRRV has been adjusted using HealthPartners' data-derived adjustment factors based on Vermont data. If the value reported here is 0 and the Pharmacy Linkage Indicator (RX_LINKFLAG; DWTCRRV803) is equal to 1, this means that this MemberID had no pharmacy TCRRV produced by the HealthPartners' software. If the value reported here is 0 and the Pharmacy Linkage Indicator also is equal to 0, this means that the supplied membership data indicated that pharmacy data could not be linked for this MemberID.</p>
DWTCRRV809	TOT_NONADJ_TCRRV	Total TCRRV (Non-Adjusted)	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's non-adjusted total TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p>

TCRRV_DETAIL					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWTCRRV810	IP_NONADJ_TCRRV	<b>Inpatient TCRRV (Non-Adjusted)</b>	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's non-adjusted inpatient TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p>
DWTCRRV811	OP_NONADJ_TCRRV	<b>Outpatient TCRRV (Non-Adjusted)</b>	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's non-adjusted outpatient TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p>
DWTCRRV812	PR_NONADJ_TCRRV	<b>Professional TCRRV (Non-Adjusted)</b>	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's non-adjusted professional TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p>
DWTCRRV813	RX_NONADJ_TCRRV	<b>Pharmacy TCRRV (Non-Adjusted)</b>	NUMBER	20	<p><b>Description:</b> This field contains a value that indicates a member's non-adjusted pharmacy TCRRV.</p> <p><b>Origin:</b> This value is generated by HealthPartners' Total Cost of Care (TCOC) software.</p> <p><b>Notes:</b> If the value reported here is 0 and the Pharmacy Linkage Indicator (RX_LINKFLAG; DWTCRRV803) is equal to 1, this means that this MemberID had no pharmacy TCRRV produced by the HealthPartners' software. If the value reported here is 0 and the Pharmacy Linkage Indicator also is equal to 0, this means that the supplied membership data indicated that pharmacy data could not be linked for this MemberID.</p>

# Type of Service Codes (Medicaid)

The Medicaid type of service codes reference data set ([REF\\_TOS](#)) includes all valid Medicaid type of service code values and descriptions and links to the medical claims data.

REF_TOS					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWTOS802	CODE	Type of Service Code	VARCHAR2	2	<p><b>Description:</b> This field is the primary identification key for each type of service record</p> <p><b>Origin:</b> The field is supplied as reported by Vermont Medicaid.</p> <p><b>Linkage:</b> This field links to the Type of Service element (TOS; MC213) in the medical claims data.</p> <p><b>Notes:</b> While this indicator is used primarily for data purposes, it may affect payment in some instances. All HCPCS codes have a corresponding TOS indicator.</p> <p>This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>
DWTOS803	DESCRIPTION	Type of Service Code Description	VARCHAR2	255	<p><b>Description:</b> This field contains the description of the Type of Service Code element (CODE; DWTOS802).</p> <p><b>Origin:</b> This field is supplied as reported by Vermont Medicaid.</p> <p><b>Notes:</b> Descriptive values are supplied as reported by the payer. This information pertains only to Medicaid claims and is reported by the Department of Vermont Health Access (DVHA).</p>

# Type of Service Codes (Medicare)

The Medicare type of service codes reference data set ([REF\\_TOS\\_MCR](#)) includes all valid Medicare type of service code values and descriptions and links to the medical claims data.

REF_TOS_MCR					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWTOSMCR802	CODE	Type of Service (Medicare) Code	VARCHAR2	2	<p><b>Description:</b> This field contains a code that indicates the type of service, as defined in the CMS Medicare Carrier Manual, for this line item on a non-institutional claim.</p> <p><b>Origin:</b> The field is supplied as reported by Medicare.</p> <p><b>Linkage:</b> This field links to the Type of Service (Medicare) element (LINE_HCFA_TYPE_OF_SERVICE_CODE; MC454) in the medical claims data.</p> <p><b>Notes:</b> While this indicator is used primarily for data purposes, it may affect payment in some instances. All HCPCS codes have a corresponding TOS indicator. This information pertains only to Medicare claims.</p>
DWTOSMCR803	DESCRIPTION	Type of Service (Medicare) Code Description	VARCHAR2	100	<p><b>Description:</b> This field contains the description of the Type of Service (Medicare) Code element (CODE; DWTOSMCR802).</p> <p><b>Origin:</b> Descriptive values are supplied as reported by Medicare.</p> <p><b>Notes:</b> This information pertains only to Medicare claims.</p>



# Use Flag Codes

The use flag codes reference data set ([REF\\_USEFLAG](#)) includes all valid use flag codes and descriptions and links to the [USEFLAG](#) fields in the medical and pharmacy claims and membership data.

REF_USEFLAG					
Reference ID	Warehouse Name	Common Name	Type	Max. Length	Description
DWUSE802	CODE	Use Flag Code	NUMBER	2	<b>Description:</b> This field contains a code that is used to identify a specific use flag.  <b>Origin:</b> This is a value-added field created by Onpoint.  <b>Linkage:</b> This field links to the Use Flag (USEFLAG) fields in the medical and pharmacy claims and membership data.
DWUSE803	DESCRIPTION	Use Flag Code Description	VARCHAR2	100	<b>Description:</b> This field contains the description of the Use Flag Code element (CODE; DWUSE802).  <b>Origin:</b> This is a value-added field created by Onpoint.

## Appendix A – Table Name & Element Prefix Map

The following table maps the data sets' common names to both their Oracle table names and element prefixes. Rows that cite new tables are highlighted below in orange.

Data Set Common Name	Oracle Table Name	Element Prefix
Admission Source Codes	REF_ADMIT_SOURCE	DWADMS
Admission Type Codes	REF_ADMIT_TYPE	DWADMT
Aid Category Codes (Medicaid)	REF_AID_CATEGORY	DWAIDCAT
APR-DRG Codes	REF_APRDRG	DWAPRDRGC
APR-DRG Labels	REF_APRDRG_LABEL	DWAPRDRGL
Bill Type Codes	REF_BILL_TYPE	DWBILT
Billing Provider Detail	BILLING_PROVIDER_DETAIL	DWBPRV
Blueprint Medical Home Codes	REF_BPMH	DWBPMH
Blueprint Service Area Codes (Medicaid)	REF_BLUE_SVC_AREA	DWBLUESA
Category of Service Codes (Medicaid)	REF_COS	DWCOS
Chronic Care Codes (Medicaid)	REF_CHRONIC_CARE	DWCCARE
Claim Status Codes	REF_CLAIM_STATUS	DWCLMS
Claim Type Codes	REF_CLAIM_TYPE	DWCLMT
Claim Type Codes (Medicaid)	REF_CLAIM_TYPE_MCD	DWCLMTMCD
Claim Type Codes (Medicare)	REF_CLAIM_TYPE_MCR	DWCLMTMCR
Compound Drug Codes	REF_COMPOUND_DRUG	DWCOMD
Coverage Level Codes	REF_COVERAGE_LEVEL	DWCOVL
Coverage Type Codes	REF_COVERAGE_TYPE	DWCOVT
CPT Codes	REF_CPT	DWCPT
CPT Modifier Codes	REF_CPT_MODIFIER	DWCPTM
Data Source Type Codes (Medicare)	REF_DATA_SOURCE_TYPE	DWDST

Data Set Common Name	Oracle Table Name	Element Prefix
Date	REF_DATE	DWDAT
Diagnosis Codes	REF_DX	DWDX
Dispense As Written Codes	REF_DAW	DWDAW
Discharge Status Codes	REF_DISCHARGE_STATUS	DWDISS
DRG Outlier Stay Codes (Medicare)	REF_DRG_OUTLIER_STAY	DWDRGOS
Dual Coverage Codes (Medicaid)	REF_DUAL_COVERAGE	DWDCOV
Entitlement Codes (Medicare)	REF_ENTITLEMENT_CODE	DWENTC
Final Bill Codes (Medicare)	REF_FINAL_BILL	DWFBC
Full Coverage Codes (Medicaid)	REF_FULL_COVERAGE	DWFCOV
Funding Source Codes (Medicaid)	REF_FUNDING_SOURCE	DWFUNDSRC
Gender Codes	REF_GENDER	DWGEN
Generic Drug Codes	REF_GENERIC_DRUG	DWGEND
Geography	REF_GEOGRAPHY	DWGEO
Inpatient Discharge Codes	REF_IPDISCHARGE	DWIPDIS
Line Processing Indicator Codes	REF_LINE_PROCESSING_IND	DWLPIIND
Long-Term Care Coverage Codes (Medicaid)	REF_LTCARE_COVERAGE	DWLTCCOV
Market Category Codes	REF_MARKET_CATEGORY	DWMKTC
MCO Claim Paid Codes (Medicare)	REF_MCO_PAID_CODE	DWMCOPC
Medical Claims	MED_DETAIL	MC
Medical Membership	MED_MEMBERSHIP	DWMM
Medicare Advantage Codes (Medicare)	REF_MEDICARE_ADVANTAGE	DWMCRAADV
Medicare Status Codes (Medicare)	REF_MEDICARE_STATUS	DWMCRSTAT
Member Detail	MEMBER_DETAIL	DWMEM
MS-DRG Codes	REF_CMSDRG	DWMSDRGC
MS-DRG Labels	REF_CMSDRG_LABEL	DWMSDRGL

Data Set Common Name	Oracle Table Name	Element Prefix
Non-Payment Reason Codes (Medicare)	REF_NON_PMT_REASON	DWNPRC
Payers	REF_PAYER	DWPAY
Pharmacy Claims	RX_DETAIL	PC
Pharmacy Detail	PHARMACY_DETAIL	DWPHRMD
Pharmacy Membership	RX_MEMBERSHIP	DWPM
Plan Type Codes	REF_PLAN_TYPE	DWPLANT
Practice Attribution	PRACTICE_ATTRIBUTION	DWATTRIB
Present on Admission Indicator Codes (Medicare)	REF_POA_IND	DWPOA
Primary Payer Codes (Medicare)	REF_PRIMARY_PAYER	DWPPC
Product Codes	REF_PRODUCT	DWPROD
Provider Detail	PROVIDER_DETAIL	DWPRVD
Provider Master	PROVIDER_MASTER	DWPRVM
Provider Specialty	REF_PROVIDER_SPECIALTY	DWPRVS
Relationship to Subscriber Codes	REF_RELATIONSHIP	DWREL
Revenue Codes	REF_REVCENTER	DWREV
Service Site Codes	REF_SERVICE_SITE	DWSVCS
Submitter Source Codes	REF_SUBMITTER_SOURCE	DWSUBSRC
Taxonomy Codes	REF_TAXONOMY	DWTAX
Type of Service Codes (Medicaid)	REF_TOS	DWTOS
Type of Service Codes (Medicare)	REF_TOS_MCR	DWTOSMCR
Use Flag Codes	REF_USEFLAG	DWUSE

## Appendix B – Change Log

### Re-Instated Fields

Table	Number	Warehouse Name	Common Name	Previous Length	Length
REF_IPDISCHARGE	DWIPDIS815	PDX	Primary Diagnosis	VARCHAR2	10

### Re-Instated Lengths

Note: **Red shading** in the last column indicates elements whose re-instated lengths are longer than those that appeared in Version 4.1; please review your code prior to importing these fields.

Table	Number	Warehouse Name	Common Name	Previous Length	Re-Instated Length
TCRRV_DETAIL	DWTCRRV809	TOT_NONADJ_TCRRV	Total TCRRV (Non-Adjusted)	8	20
TCRRV_DETAIL	DWTCRRV810	IP_NONADJ_TCRRV	Inpatient TCRRV (Non-Adjusted)	8	20
TCRRV_DETAIL	DWTCRRV811	OP_NONADJ_TCRRV	Outpatient TCRRV (Non-Adjusted)	8	20
TCRRV_DETAIL	DWTCRRV812	PR_NONADJ_TCRRV	Professional TCRRV (Non-Adjusted)	8	20
TCRRV_DETAIL	DWTCRRV813	RX_NONADJ_TCRRV	Pharmacy TCRRV (Non-Adjusted)	8	20



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254 Commercial Street  
Suite 257  
Portland, ME 04101  
207 623-2555

[www.OnpointHealthData.org](http://www.OnpointHealthData.org)